



(12) **DEMANDE DE BREVET CANADIEN
CANADIAN PATENT APPLICATION**

(13) **A1**

(86) Date de dépôt PCT/PCT Filing Date: 2020/12/18
(87) Date publication PCT/PCT Publication Date: 2021/07/01
(85) Entrée phase nationale/National Entry: 2022/06/22
(86) N° demande PCT/PCT Application No.: US 2020/065796
(87) N° publication PCT/PCT Publication No.: 2021/133644
(30) Priorité/Priority: 2019/12/23 (EP19425098.1)

(51) Cl.Int./Int.Cl. *C07K 14/605* (2006.01),
A61K 38/26 (2006.01), *A61P 1/16* (2006.01),
A61P 3/04 (2006.01), *A61P 3/10* (2006.01),
C07K 14/575 (2006.01), *C12N 15/16* (2006.01)
(71) Demandeur/Applicant:
MERCK SHARP & DOHME LLC, US
(72) Inventeurs/Inventors:
BIANCHI, ELISABETTA, IT;
DENG, QIAOLIN, US;
LIN, SONGNIAN, US;
ORVIETO, FEDERICA, IT;
PALANI, ANANDAN, US;
PESSI, ANTONELLO, IT; ...

(54) Titre : CO-AGONISTES TRIAZOLE AGRAFES DE RECEPTEURS DU GLUCAGON ET DU GLP-1
(54) Title: STAPLED TRIAZOLE CO-AGONISTS OF THE GLUCAGON AND GLP-1 RECEPTORS

(57) Abrégé/Abstract:

The stapled peptides of the present invention, and pharmaceutically acceptable salts thereof, are co-agonists of the glucagon and GLP-1 receptors, and may be useful in the treatment, prevention and suppression of diseases mediated by the glucagon receptor and the GLP-1 receptor, including but not limited to, metabolic disorders such as diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), and obesity.



(72) Inventeurs(suite)/Inventors(continued): SAWYER, TOMI K., US

(74) Agent: RIDOUT & MAYBEE LLP

Date Submitted: 2022/06/22

CA App. No.: 3162800

Abstract:

The stapled peptides of the present invention, and pharmaceutically acceptable salts thereof, are co-agonists of the glucagon and GLP-1 receptors, and may be useful in the treatment, prevention and suppression of diseases mediated by the glucagon receptor and the GLP-1 receptor, including but not limited to, metabolic disorders such as diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), and obesity.

STAPLED TRIAZOLE CO-AGONISTS OF THE GLUCAGON AND GLP-1 RECEPTORS

SEQUENCE LISTING

5 The instant application contains a Sequence Listing which has been submitted electronically in ASCII format and is hereby incorporated by reference in its entirety. Said ASCII copy, created on December 3, 2020, is named 24935-WO-PCT-SEQLIST.txt and is 31 Kb in size.

BACKGROUND OF THE INVENTION

10 The present invention is related to stapled co-agonist peptides of the glucagon and GLP-1 receptors, and the use of these stapled GLP-1 receptor/GCG receptor co-agonists for treatment of metabolic disorders.

 Pre-proglucagon is a 158 amino acid precursor polypeptide that is processed in different tissues to form a number of different proglucagon-derived peptides, including glucagon, glucagon-like peptide- 1 (GLP-1), glucagon-like peptide-2 (GLP-2) and oxyntomodulin (OXM), that are involved in a wide variety of physiological functions, including glucose homeostasis, insulin secretion, gastric emptying, and intestinal growth, as well as the regulation of food intake. Glucagon is a 29-amino acid peptide that corresponds to amino acids 33 through 61 of pre-proglucagon, while GLP-1 is produced as a 37-amino acid peptide that corresponds to amino acids 72 through 108 of pre-proglucagon. GLP-1 (7-36) amide or GLP-1 (7-37) acid are biologically potent forms of GLP-1, that demonstrate essentially equivalent activity at the GLP-1 receptor.

 During hypoglycemia, when blood glucose levels drop below normal, glucagon signals the liver to break down glycogen and release glucose, causing blood glucose levels to rise toward a normal level. Hypoglycemia is a common side effect of insulin therapy in patients with hyperglycemia (elevated blood glucose levels) due to diabetes. Thus, glucagon's most recognized role in glucose regulation is to counteract the action of insulin and maintain blood glucose levels.

 GLP-1 has different biological activities compared to glucagon. Its actions include stimulation of insulin synthesis and secretion, inhibition of glucagon secretion, and inhibition of food intake. GLP-1 has been shown to reduce hyperglycemia in diabetics. Exendin-4, a peptide from lizard venom that shares about 50% amino acid identity with GLP-1, activates the GLP-1 receptor and likewise has been shown to reduce hyperglycemia in diabetics.

There is also evidence that GLP-1 and exendin-4 may reduce food intake and promote weight loss, an effect that would be beneficial not only for diabetics but also for patients suffering from obesity. Patients with obesity have a higher risk of diabetes, hypertension, hyperlipidemia, cardiovascular disease, and musculoskeletal diseases.

5 Glucagon is a peptide hormone structurally related to GLP-1 that is well recognized for its acute ability to increase blood glucose through stimulation of glycogenolysis and gluconeogenesis (Jiang & Zhang, *Am. J. Physiol. Endocrinol. Metab.* 284: E671–E678 (2003)). Of lesser appreciation are the chronic effects of glucagon pharmacology characterized by increases in thermogenesis, satiety, lipolysis, fatty acid oxidation, and ketogenesis (Habegger et al., *Nat. Rev. Endocrinol.* 6: 689–697 (2010)). Repeated administration of glucagon was first reported decades ago to yield improvements in rodent metabolism, accompanied with lower body weight (Salter, *Am. J. Clin. Nutr.* 8: 535–539 (1960)). Nonetheless, the inherent risk of hyperglycemia, especially in insulinresistant states such T2DM, has complicated the translation of these observations to human study.

15 The hormone oxyntomodulin (OXM, glucagon-37) is a posttranslational product of preproglucagon processing in the intestine and central nervous system (CNS) and is secreted from L-cells in the gut in response to food intake. Discovered in 1983, OXM has been implicated in the regulation of food intake and energy expenditure (Jarrouse et al., *Endocrinol.* 115: 102-105 (1984); Schjoldager et al., *Eur. J. Clin. Invest.*, 18: 499-503 (1988)). Central or peripheral administration of OXM in rats causes a decrease in short term food intake with minimal effects on gastric emptying (Dakin et al. *Endocrinology*, 142: 4244-4250 (2001), Dakin et al. *Endocrinology*, 145: 2687-2695 (2004)). Repeated intracerebroventricular administration of OXM in rats results in elevated core temperatures and reduced weight gain compared to pair-fed animals, suggesting effects on both caloric intake and energy expenditure (Dakin et al. *Am. J. Physiol. Endocrinol. Metab.*, 283: E1173-E1177 (2002)).

25 In related studies, peripheral administration of OXM dose-dependently inhibited both fast-induced and dark phase food intake, but unlike GLP-1, had no effect on gastric emptying. OXM also reduced levels of fasting ghrelin and increased c-fos immunoreactivity, in the arcuate nucleus (ARC). Repeated seven-day IP administration of OXM caused a reduction in the rate of body weight gain and adiposity in rats (See Dakin et al. *Endocrinology*, 145: 2687-2695 (2004)).

30 Studies of OXM action in mice have demonstrated that although OXM can activate both the glucagon (GCG) and the GLP-1 receptors, the anorectic actions of OXM require only the GLP-1 receptor, as icv OXM inhibits food intake in glucagon receptor knockout mice. However,

the anorectic effects of OXM are completely absent in GLP-1 receptor knockout mice. Furthermore, exendin-4, but not OXM, regulates energy expenditure in mice. Hence, OXM appears to be a weak agonist at the GLP-1 receptor, when used in pharmacological concentrations (See Baggio et al., *Gastroenterol.* 127: 546-58 (2004)). OXM was also found to
5 ameliorate glucose intolerance in mice fed a high fat diet (Dakin et al., *Am. J. Physiol. Endocrinol. Metab.* 294: E142-E147 (2008) and increase the intrinsic heart rate in mice independent of the GLP-1 receptor (Sowden et al., *Am. J. Physiol. Regul. Integr. Comp. Physiol.* 292: R962-R970 (2007)). OXM has also been shown to differentially affect GLP-1 receptor beta-arrestin recruitment and signaling through Galpha (Jorgensen et al., *J. Pharma. Exp. Therapeut.*
10 322: 148-154 (2007)) and to differentially affect hypothalamic neuronal activation following peripheral injection of OXM (Choudhri et al., *Biochem. Biophys. Res. Commun.* 350: 298-306 (2006)).

In humans, a single 90 minute intravenous infusion of OXM in normal weight healthy subjects reduced hunger scores and food intake at a buffet meal by about 19%. Cumulative
15 twelve-hour caloric intake was reduced by about 11% with no reports of nausea or changes in food palatability (Cohen et al., *J. Clin. Endocrinol. Metab.*, 88: 4696-4701 (2003); Lykkegaard et al., *ADA Scientific Sessions*, Abstract #1506-P (2003)). More recently, pre-prandial injections of OXM over a four-week period in obese healthy volunteers (BMI about 33) led to a significant reduction of caloric intake on the first day of treatment (about 25%) that was maintained over the
20 course of the study (35% reduction after four weeks) (Wynne et al., *Diabetes* 54: 2390-2395 (2005)). Robust weight loss was observed at the end of the study in treated subjects (1.9%, placebo-corrected). Plasma levels of OXM were similar to that observed in the infusion study (peak concentration about 950 pM). The absence of any tachyphylaxis and a low incidence of mild and transient nausea (about 3%) despite the relatively high doses necessitated by the poor in
25 vivo stability of OXM (plasma $t_{1/2}$ < 12 minutes) renders this hormone one of the few obesity targets with both human validation and an attractive tolerability profile.

OXM has a very short half-life and is rapidly inactivated by the cell surface dipeptidyl peptidase IV (DPP-IV) (Zhu et al., *J. Biol. Chem.* 278: 22418-22423 (2002)). However, DPP-IV inhibitors are weight-neutral in the clinic, suggesting that supraphysiological levels of OXM
30 (900-1000 pM) may be required to achieve weight loss in humans. OXM peptide analogs for inducing weight loss in humans have been the object of Published International Application Nos. WO03/022304, WO2004/062685, WO2006/134340, and WO2010/096052.

Recently, two independent and simultaneous papers reported the use of relatively balanced GLP-1 receptor/GCG receptor co-agonists as being of enhanced efficacy and safety relative to pure GLP1R agonists in the treatment of rodent obesity, with simultaneous improvement in glycemic control (Day et al., Nat. Chem. Biol. 5: 749–757 (2009); Pocai et al.,
5 Diabetes 58: 2258–2266 (2009)). Of related significance is work with oxyntomodulin (OXM), an endogenous precursor to glucagon, which is secreted postprandially by L-cells of the jejuno–ileum together with GLP-1 (Holst, Regul. Pept. 93: 45–51 (2000); Drucker, Nat. Clin. Pract. Endocrinol. Metab. 1: 22–31 (2005)).

Glucagon peptide analogs and derivatives modified to have various degrees of activity at
10 the GLP-1 receptor and GCG receptor have been disclosed in Published International Application Nos. WO2008/1010017, WO2009/155258, WO2011/075393, WO2012/177444, WO2012/177443; WO2016/065090; and WO2019/060660. Some of the disclosed glucagon peptide analogs were reported therein to have activity at both the GLP-1 receptor and GCG receptor; however, there remains a need for co-agonist peptides that have relatively balanced
15 activity or potency at the GLP-1 receptor and GCG receptor.

BRIEF SUMMARY OF THE INVENTION

The present invention provides stapled co-agonist peptides of the glucagon (GCG) receptor and the glucagon-like protein 1 (GLP-1) receptor, which have an α -helical conformation
20 due to intramolecular ring formation between two peptide amino acids. The alpha helical structure of the stapled peptides of the present invention results in an increase in physical stability due to decreased proteolytic degradation, and in a lower propensity to self-associate to form β -sheets via hydrogen bonding resulting in a decrease in fibril formation and interpeptide aggregation. Reduced fibril formation and peptide aggregation may result in an increase in
25 peptide efficacy and allows for the use of lower doses of peptide for the same physiological or pharmacological effect. Additionally, the reduction in fibril formation and peptide aggregation leads to a reduction in undesirable amounts of precipitate formation in sterile peptide solutions and peptide formulations. The precipitate formation can lead to cloudy and gel-like suspensions which may adversely affect the dosing accuracy and may cause immunogenic reactions on
30 injection.

The peptides of the present invention are useful for the treatment of metabolic diseases or disorders, such as but not limited to, diabetes (e.g., type 1 diabetes, Type 2 diabetes, or

gestational diabetes), non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), and/or obesity.

DETAILED DESCRIPTION OF THE INVENTION

5 The present invention provides stapled peptide co-agonists of the glucagon (GCG) receptor and the glucagon-like protein 1 (GLP-1) receptor that have the amino acid sequences provided below.

In one embodiment, the GCG receptor/GLP-1 receptor co-agonist peptides of the present invention comprise the amino acid sequence of native human glucagon

10 HSQGTFTSDYSKYLDSRRAQDFVQWLMNT (SEQ ID NO:1)

wherein

- 1) L-Serine at X² is replaced with alpha-aminoisobutyric acid (Aib), or D-Serine;
 - 2) Tyrosine at X¹⁰ is replaced with Lysine, Lysine conjugated to a fatty acid, or Lysine conjugated to a fatty diacid;
 - 15 3) L-Serine at X¹⁶ is replaced with alpha-aminoisobutyric acid (Aib), Alanine, Glutamic acid, pra or Acb;
 - 4) Arginine at X¹⁸ is replaced with Alanine;
 - 5) X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid; and may include up to six additional amino acid substitutions selected from:
 - 20 1) Arginine at X¹⁷ is optionally replaced with pra;
 - 2) Glutamine at X²⁰ is optionally replaced with Nle(εN₃), or pra;
 - 3) Aspartic acid at X²¹ is optionally replaced with Nle(εN₃);
 - 4) Glutamine at X²⁴ is optionally replaced with Nle(εN₃), pra or Acb;
 - 5) Methionine at X²⁷ is optionally replaced with Leucine, Norleucine, or L-Methionine
 - 25 sulphone;
 - 6) Asparagine at X²⁸ is optionally replaced with Aspartic acid, Nle(εN₃), or pra;
- provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra; wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring; wherein Acb is 1-aminocyclobutane-1-carboxylic acid,
- 30 Nle(εN₃) is 6-Azido-L-norleucine, Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; or a pharmaceutically acceptable salt thereof.

In a class of this embodiment, the peptide contains at one Nle(εN₃) and one pra.

In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring, or the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the GCG receptor/GLP-1 receptor co-agonist peptides of the present invention comprise the amino acid sequence of native human glucagon (SEQ ID NO:1) wherein Tyrosine at X¹⁰ is replaced with is Lysine, or Lysine conjugated to a fatty acid; or a pharmaceutically acceptable salt thereof.

In another class of this embodiment, the GCG receptor/GLP-1 receptor co-agonist peptides of the present invention comprise the amino acid sequence of native human glucagon (SEQ ID NO:1) wherein X³⁰ is absent; or a pharmaceutically acceptable salt thereof.

In another class of this embodiment, the GCG receptor/GLP-1 receptor co-agonist peptides of the present invention comprise the amino acid sequence of native human glucagon (SEQ ID NO:1) with up to five additional amino acid substitutions are selected from:

- 1) Arginine at X¹⁷ is optionally replaced with pra;
 - 2) Glutamine at X²⁰ is optionally replaced with Nle(ϵ N₃), or pra;
 - 3) Aspartic acid at X²¹ is optionally replaced with Nle(ϵ N₃);
 - 4) Glutamine at X²⁴ is optionally replaced with Nle(ϵ N₃), pra or Acb;
 - 5) Methionine at X²⁷ is optionally replaced with Leucine, Norleucine, or L-Methionine sulphone;
 - 6) Asparagine at X²⁸ is optionally replaced with Aspartic acid, Nle(ϵ N₃), or pra;
- provided the peptide contains at least one Nle(ϵ N₃) and one pra, or one Peg₃N₃Ala and one pra; wherein Nle(ϵ N₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring; and wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(ϵ N₃) is 6-Azido-L-norleucine, Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; or a pharmaceutically acceptable salt thereof.

In another class of this embodiment, the GCG receptor/GLP-1 receptor co-agonist peptides of the present invention comprise the amino acid sequence of native human glucagon (SEQ ID

NO:1) with up to four additional amino acid substitutions are selected from:

- 1) Arginine at X¹⁷ is optionally replaced with pra;
 - 2) Glutamine at X²⁰ is optionally replaced with Nle(εN₃), or pra;
 - 3) Aspartic acid at X²¹ is optionally replaced with Nle(εN₃);
 - 5 4) Glutamine at X²⁴ is optionally replaced with Nle(εN₃), pra or Acb;
 - 5) Methionine at X²⁷ is optionally replaced with Leucine, Norleucine, or L-Methionine sulphone;
 - 6) Asparagine at X²⁸ is optionally replaced with Aspartic acid, Nle(εN₃), or pra;
- provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra;
- 10 wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring; and wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(εN₃) is 6-Azido-L-norleucine, Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; or a pharmaceutically acceptable salt thereof.

In another embodiment, the present invention provides a peptide comprising the amino acid sequence

15 HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO: 29) wherein

- X² is alpha-aminoisobutyric acid (Aib), or D-Serine;
- X¹⁰ is Lysine, Lysine conjugated to a fatty acid, or Lysine conjugated to a fatty diacid;
- 20 X¹⁶ is alpha-aminoisobutyric acid (Aib), Alanine, Glutamic acid, pra or 1-aminocyclobutane-1-carboxylic acid (Acb);
- X¹⁷ is Arginine, or pra;
- X²⁰ is Glutamine, Nle(εN₃), or pra;
- X²¹ is Aspartic acid, or Nle(εN₃);
- 25 X²⁴ is Glutamine, Nle(εN₃), pra or 1-aminocyclobutane-1-carboxylic acid (Acb);
- X²⁷ is Leucine, Methionine, Norleucine, or L-Methionine sulphone;
- X²⁸ is Aspartic acid, Nle(εN₃), or pra;
- X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid;
- provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra;
- 30 wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring;

wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(ϵ N₃) is 6-Azido-L-norleucine, Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; and wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.

In a class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid. In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty diacid.

In another class of this embodiment, X¹⁰ is Lysine, Lysine conjugated to a fatty acid by a gamma-glutamic acid – gamma-glutamic acid linker, or Lysine conjugated to a fatty diacid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, the fatty diacid at position 10 comprises a C14, C15, C16, C17, C18, C19, or C20 fatty diacid, and the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid.

In another class of this embodiment, the fatty diacid at position 10 comprises a C14, C15, C16, C17, C18, C19, or C20 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C16 or C18 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C18 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C16 fatty diacid.

In another class of this embodiment, the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 or C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 fatty acid.

In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid.

In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

5 In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X² is alpha-aminoisobutyric acid. In another class of this embodiment, X² is D-Serine.

In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, Alanine,
10 Glutamic acid, pra or Acb. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, or Alanine. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In another class of this embodiment, X¹⁶ is Alanine. In another class of this embodiment, X¹⁶ is Glutamic acid. In another class of this embodiment, X¹⁶ is pra. In another class of this embodiment, X¹⁶ is Acb.

15 In another class of this embodiment, X¹⁷ is Arginine. In another class of this embodiment, X¹⁷ is pra.

In another class of this embodiment, X²⁰ is Glutamine. In another class of this embodiment, X²⁰ is Nle(εN₃). In another class of this embodiment, X²⁰ is pra.

In another class of this embodiment, X²¹ is Aspartic acid. In another class of this
20 embodiment, X²¹ is Nle(εN₃).

In another class of this embodiment, X²⁴ is Glutamine. In another class of this embodiment, X²⁴ is Nle(εN₃). In another class of this embodiment, X²⁴ is pra. In another class of this embodiment, X²⁴ is Acb.

In another class of this embodiment, X²⁷ is Leucine. In another class of this
25 embodiment, X²⁷ is Methionine. In another class of this embodiment, X²⁷ is Norleucine. In another class of this embodiment, X²⁷ is L-Methionine sulphone.

In another class of this embodiment, X²⁸ is Aspartic acid. In another class of this embodiment, X²⁸ is Nle(εN₃). In another class of this embodiment, X²⁸ is pra.

In another class of this embodiment, X³⁰ is absent. In another class of this embodiment, X³⁰ is Lysine linked at the C-terminus to gamma-Glutamic acid.

In another class of this embodiment, Nle(εN₃) and pra cyclize to form a triazole containing ring.

5 In another class of this embodiment, Peg₃N₃Ala and pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide contains at one Nle(εN₃) and one pra.

In another class of this embodiment, the azide of Nle(εN₃) and the alkyne of pra cyclize to form a triazole containing ring, or the azide of Peg₃N₃Ala and the alkyne of pra cyclize to
10 form a triazole containing ring.

In another class of this embodiment, the azide of Nle(εN₃) and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

15 In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

In another class of this embodiment, the peptide has the amino acid sequence of SEQ ID
20 NO: 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, or 28.

The aforementioned GCG/GLP-1 receptor co-agonist peptides have the structure as shown in Table 1.

In another embodiment, the present invention provides a peptide comprising the amino acid sequence

25 HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO: 29) wherein

X² is alpha-aminoisobutyric acid (Aib), or D-Serine;

X¹⁰ is Lysine, or Lysine conjugated to a fatty acid;

X¹⁶ is alpha-aminoisobutyric acid (Aib), Alanine, Glutamic acid, pra or 1-aminocyclobutane-1-
30 carboxylic acid (Acb);

X¹⁷ is Arginine, or pra;

X²⁰ is Glutamine, Nle(εN₃), or pra;

- X²¹ is Aspartic acid, or Nle(εN₃);
- X²⁴ is Glutamine, Nle(εN₃), pra or 1-aminocyclobutane-1-carboxylic acid (Acb);
- X²⁷ is Leucine, Methionine, Norleucine, or L-Methionine sulphone;
- X²⁸ is Aspartic acid, Nle(εN₃), or pra;
- 5 X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid; provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra; wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring; wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(εN₃) is 6-Azido-L-norleucine,
- 10 Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; and wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.

In another class of this embodiment, the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 or C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 fatty acid.

In another class of this embodiment, X¹⁰ is Lysine. In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid.

20 In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

25 In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

30 In another class of this embodiment, X¹⁰ is Lysine conjugated to a C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

5 In another class of this embodiment, X² is alpha-aminoisobutyric acid. In another class of this embodiment, X² is D-Serine.

In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, Alanine, Glutamic acid, pra or Acb. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, or Alanine. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In
10 another class of this embodiment, X¹⁶ is Alanine. In another class of this embodiment, X¹⁶ is Glutamic acid. In another class of this embodiment, X¹⁶ is pra. In another class of this embodiment, X¹⁶ is Acb.

In another class of this embodiment, X¹⁷ is Arginine. In another class of this embodiment, X¹⁷ is pra.

15 In another class of this embodiment, X²⁰ is Glutamine. In another class of this embodiment, X²⁰ is Nle(εN₃). In another class of this embodiment, X²⁰ is pra.

In another class of this embodiment, X²¹ is Aspartic acid. In another class of this embodiment, X²¹ is Nle(εN₃).

In another class of this embodiment, X²⁴ is Glutamine. In another class of this
20 embodiment, X²⁴ is Nle(εN₃). In another class of this embodiment, X²⁴ is pra. In another class of this embodiment, X²⁴ is Acb.

In another class of this embodiment, X²⁷ is Leucine. In another class of this embodiment, X²⁷ is Methionine. In another class of this embodiment, X²⁷ is Norleucine. In
another class of this embodiment, X²⁷ is L-Methionine sulphone.

25 In another class of this embodiment, X²⁸ is Aspartic acid. In another class of this embodiment, X²⁸ is Nle(εN₃). In another class of this embodiment, X²⁸ is pra.

In another class of this embodiment, X³⁰ is absent. In another class of this embodiment, X³⁰ is Lysine linked at the C-terminus to gamma-Glutamic acid.

In another class of this embodiment, Nle(ϵ N₃) and pra cyclize to form a triazole containing ring.

In another class of this embodiment, Peg₃N₃Ala and pra cyclize to form a triazole containing ring.

5 In another class of this embodiment, the peptide contains at one Nle(ϵ N₃) and one pra.

In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring, or the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

10 In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

15 In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

In another class of this embodiment, the peptide has the amino acid sequence of SEQ ID NO: 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, or 28.

20 The aforementioned GCG/GLP-1 receptor co-agonist peptides have the structure as shown in Table 1.

In another embodiment, the present invention provides a peptide comprising the amino acid sequence

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO: 29) wherein

25 X² is alpha-aminoisobutyric acid, or D-Serine;

X¹⁰ is Lysine or Lysine conjugated to a gamma-Glutamic acid-gamma Glutamic acid – C16 fatty acid;

X¹⁶ is alpha-aminoisobutyric acid or Alanine;

X¹⁷ is Arginine;

30 X²⁰ is Glutamine;

X²¹ is Aspartic acid;

X²⁴ is pra;

X²⁷ is Leucine, or Norleucine;

X²⁸ is Nle(εN₃);

X³⁰ is absent;

wherein Nle(εN₃) and pra cyclize to form a triazole containing ring;

- 5 wherein Nle(εN₃) is 6-Azido-L-norleucine, and pra is (R)-2-aminopent-4-ynoic acid; and wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.

In a class of this embodiment, X² is alpha-aminoisobutyric acid. In another embodiment of the present invention, X² is D-Serine.

- 10 In another class of this embodiment, X¹⁰ is Lysine. In another class of this embodiment, X¹⁰ is Lysine conjugated to a gamma-Glutamic acid-gamma Glutamic acid – C16.

In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In another embodiment, X¹⁶ is Alanine.

- 15 In another class of this embodiment, X²⁷ is Leucine. In another class of this embodiment, X²⁷ is Norleucine.

In another class of this embodiment, the azide of Nle(εN₃) and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

- 20 In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

In particular embodiments, the present invention provides a peptide consisting of the amino acid sequence

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO:

- 25 29) wherein

X² is alpha-aminoisobutyric acid (Aib), or D-Serine;

X¹⁰ is Lysine, Lysine conjugated to a fatty acid, or Lysine conjugated to a fatty diacid;

X¹⁶ is alpha-aminoisobutyric acid (Aib), Alanine, Glutamic acid, pra or 1-aminocyclobutane-1-carboxylic acid (Acb);

- 30 X¹⁷ is Arginine, or pra;

X²⁰ is Glutamine, Nle(εN₃), or pra;

- X²¹ is Aspartic acid, or Nle(εN₃);
- X²⁴ is Glutamine, Nle(εN₃), pra or 1-aminocyclobutane-1-carboxylic acid (Acb);
- X²⁷ is Leucine, Methionine, Norleucine, or L-Methionine sulphone;
- X²⁸ is Aspartic acid, Nle(εN₃), or pra;
- 5 X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid; provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra; wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring; wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(εN₃) is 6-Azido-L-norleucine,
- 10 Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; and wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.

In a class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid. In
15 another class of this embodiment, X¹⁰ is Lysine. In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty diacid.

In another class of this embodiment, X¹⁰ is Lysine, Lysine conjugated to a fatty acid by a
gamma-glutamic acid – gamma-glutamic acid linker, or Lysine conjugated to a fatty diacid via a
20 gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, the fatty diacid at position 10 comprises a C14, C15, C16, C17, C18, C19, or C20 fatty diacid, and the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid.

In another class of this embodiment, the fatty diacid at position 10 comprises a C14, C15,
25 C16, C17, C18, C19, or C20 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C16 or C18 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C18 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C16 fatty diacid.

In another class of this embodiment, the fatty acid at position 10 comprises a C14, C16,
30 C17, C18, C19, or C20 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 or C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 fatty acid.

In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid.

In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

5 In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

10 In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

15 In another class of this embodiment, X² is alpha-aminoisobutyric acid. In another class of this embodiment, X² is D-Serine.

In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, Alanine, Glutamic acid, pra or Acb. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, or Alanine. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In
20 another class of this embodiment, X¹⁶ is Alanine. In another class of this embodiment, X¹⁶ is Glutamic acid. In another class of this embodiment, X¹⁶ is pra. In another class of this embodiment, X¹⁶ is Acb.

In another class of this embodiment, X¹⁷ is Arginine. In another class of this embodiment, X¹⁷ is pra.

25 In another class of this embodiment, X²⁰ is Glutamine. In another class of this embodiment, X²⁰ is Nle(εN₃). In another class of this embodiment, X²⁰ is pra.

In another class of this embodiment, X²¹ is Aspartic acid. In another class of this embodiment, X²¹ is Nle(εN₃).

In another class of this embodiment, X²⁴ is Glutamine. In another class of this embodiment, X²⁴ is Nle(ϵ N₃). In another class of this embodiment, X²⁴ is pra. In another class of this embodiment, X²⁴ is Acb.

In another class of this embodiment, X²⁷ is Leucine. In another class of this embodiment, X²⁷ is Methionine. In another class of this embodiment, X²⁷ is Norleucine. In another class of this embodiment, X²⁷ is L-Methionine sulphone.

In another class of this embodiment, X²⁸ is Aspartic acid. In another class of this embodiment, X²⁸ is Nle(ϵ N₃). In another class of this embodiment, X²⁸ is pra.

In another class of this embodiment, X³⁰ is absent. In another class of this embodiment, X³⁰ is Lysine linked at the C-terminus to gamma-Glutamic acid.

In another class of this embodiment, Nle(ϵ N₃) and pra cyclize to form a triazole containing ring.

In another class of this embodiment, Peg₃N₃Ala and pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide contains at one Nle(ϵ N₃) and one pra.

In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring, or the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

In another class of this embodiment, the peptide has the amino acid sequence of SEQ ID NO: 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, or 28.

In particular embodiments, the present invention provides a peptide consisting of the amino acid sequence

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO: 29) wherein

- X² is alpha-aminoisobutyric acid (Aib), or D-Serine;
 X¹⁰ is Lysine, or Lysine conjugated to a fatty acid;
 X¹⁶ is alpha-aminoisobutyric acid (Aib), Alanine, Glutamic acid, pra or 1-aminocyclobutane-1-carboxylic acid (Acb);
- 5 X¹⁷ is Arginine, or pra;
 X²⁰ is Glutamine, Nle(εN₃), or pra;
 X²¹ is Aspartic acid, or Nle(εN₃);
 X²⁴ is Glutamine, Nle(εN₃), pra or 1-aminocyclobutane-1-carboxylic acid (Acb);
 X²⁷ is Leucine, Methionine, Norleucine, or L-Methionine sulphone;
- 10 X²⁸ is Aspartic acid, Nle(εN₃), or pra;
 X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid;
 provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra;
 wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra
 cyclize to form a triazole containing ring;
- 15 wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(εN₃) is 6-Azido-L-norleucine,
 Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; and
 wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.
- 20 In another class of this embodiment, the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 or C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 fatty acid.
- In another class of this embodiment, X¹⁰ is Lysine. In another class of this embodiment,
- 25 X¹⁰ is Lysine conjugated to a fatty acid.
- In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.
- In another class of this embodiment, X¹⁰ is Lysine.
- In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid via a
- 30 gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

5 In another class of this embodiment, X¹⁰ is Lysine conjugated to a C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

10 In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X² is alpha-aminoisobutyric acid. In another class of this embodiment, X² is D-Serine.

In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, Alanine, Glutamic acid, pra or Acb. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, or Alanine. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In another class of this embodiment, X¹⁶ is Alanine. In another class of this embodiment, X¹⁶ is Glutamic acid. In another class of this embodiment, X¹⁶ is pra. In another class of this embodiment, X¹⁶ is Acb.

20 In another class of this embodiment, X¹⁷ is Arginine. In another class of this embodiment, X¹⁷ is pra.

In another class of this embodiment, X²⁰ is Glutamine. In another class of this embodiment, X²⁰ is Nle(εN₃). In another class of this embodiment, X²⁰ is pra.

In another class of this embodiment, X²¹ is Aspartic acid. In another class of this embodiment, X²¹ is Nle(εN₃).

25 In another class of this embodiment, X²⁴ is Glutamine. In another class of this embodiment, X²⁴ is Nle(εN₃). In another class of this embodiment, X²⁴ is pra. In another class of this embodiment, X²⁴ is Acb.

In another class of this embodiment, X²⁷ is Leucine. In another class of this embodiment, X²⁷ is Methionine. In another class of this embodiment, X²⁷ is Norleucine. In another class of this embodiment, X²⁷ is L-Methionine sulphone.

In another class of this embodiment, X²⁸ is Aspartic acid. In another class of this embodiment, X²⁸ is Nle(εN₃). In another class of this embodiment, X²⁸ is pra.

In another class of this embodiment, X³⁰ is absent. In another class of this embodiment, X³⁰ is Lysine linked at the C-terminus to gamma-Glutamic acid.

5 In another class of this embodiment, Nle(εN₃) and pra cyclize to form a triazole containing ring.

In another class of this embodiment, Peg₃N₃Ala and pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide contains at one Nle(εN₃) and one pra.

10 In another class of this embodiment, the azide of Nle(εN₃) and the alkyne of pra cyclize to form a triazole containing ring, or the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Nle(εN₃) and the alkyne of pra cyclize to form a triazole containing ring.

15 In another class of this embodiment, the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

20 In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

In another class of this embodiment, the peptide has the amino acid sequence of SEQ ID NO: 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, or 28.

The aforementioned GCG/GLP-1 receptor co-agonist peptides have the structure as shown in Table 1.

25 In another embodiment, the present invention provides a peptide consisting of the amino acid sequence

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO: 29), wherein

X² is alpha-aminoisobutyric acid (Aib), or D-Serine;

30 X¹⁰ is Lysine or Lysine conjugated to a gamma-Glutamic acid-gamma Glutamic acid – C16 fatty acid;

X¹⁶ is alpha-aminoisobutyric acid (Aib), or Alanine;

X¹⁷ is Arginine;

X²⁰ is Glutamine;

X²¹ is Aspartic acid;

X²⁴ is pra;

5 X²⁷ is Leucine, or Norleucine;

X²⁸ is Nle(εN₃);

X³⁰ is absent;

wherein Nle(εN₃) and pra cyclize to form a triazole containing ring;

wherein Nle(εN₃) is 6-Azido-L-norleucine, and pra is (R)-2-aminopent-4-ynoic acid; and

10 wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.

In a class of this embodiment, X² is alpha-aminoisobutyric acid. In another embodiment of the present invention, X² is D-Serine.

In another class of this embodiment, X¹⁰ is Lysine. In another class of this embodiment, 15 X¹⁰ is Lysine conjugated to a gamma-Glutamic acid-gamma Glutamic acid – C16.

In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In another embodiment, X¹⁶ is Alanine.

In another class of this embodiment, X²⁴ is Glutamine. In another class of this embodiment, X²⁴ is Nle(εN₃). In another class of this embodiment, X²⁴ is pra. In another class 20 of this embodiment, X²⁴ is Acb.

In another class of this embodiment, X²⁷ is Leucine. In another class of this embodiment, X²⁷ is Norleucine.

In another class of this embodiment, the azide of Nle(εN₃) and the alkyne of pra cyclize to form a triazole containing ring.

25 In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

The present invention further provides a pharmaceutical composition comprising a 30 peptide having the amino acid sequence

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO:

29) wherein

X² is alpha-aminoisobutyric acid (Aib), or D-Serine;

X¹⁰ is Lysine, Lysine conjugated to a fatty acid, or Lysine conjugated to a fatty diacid;

5 X¹⁶ is alpha-aminoisobutyric acid (Aib), Alanine, Glutamic acid, pra or 1-aminocyclobutane-1-carboxylic acid (Acb);

X¹⁷ is Arginine, or pra;

X²⁰ is Glutamine, Nle(εN₃), or pra;

X²¹ is Aspartic acid, or Nle(εN₃);

10 X²⁴ is Glutamine, Nle(εN₃), pra or 1-aminocyclobutane-1-carboxylic acid (Acb);

X²⁷ is Leucine, Methionine, Norleucine, or L-Methionine sulphone;

X²⁸ is Aspartic acid, Nle(εN₃), or pra;

X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid;

provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra;

15 wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring;

wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(εN₃) is 6-Azido-L-norleucine, Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; and wherein the peptide optionally includes a protecting group that, if present, is
20 joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.

In a class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid. In another class of this embodiment, X¹⁰ is Lysine. In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid.

25 In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty diacid.

In another class of this embodiment, X¹⁰ is Lysine, Lysine conjugated to a fatty acid by a gamma-glutamic acid – gamma-glutamic acid linker, or Lysine conjugated to a fatty diacid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, the fatty diacid at position 10 comprises a C14, C15, C16, C17, C18, C19, or C20 fatty diacid, and the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid.
30

In another class of this embodiment, the fatty diacid at position 10 comprises a C14, C15, C16, C17, C18, C19, or C20 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C16 or C18 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C18 fatty diacid. In another class of this embodiment, the fatty diacid comprises a C16 fatty diacid.

In another class of this embodiment, the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 or C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 fatty acid.

In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid.

In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X² is alpha-aminoisobutyric acid. In another class of this embodiment, X² is D-Serine.

In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, Alanine, Glutamic acid, pra or Acb. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, or Alanine. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In another class of this embodiment, X¹⁶ is Alanine. In another class of this embodiment, X¹⁶ is Glutamic acid. In another class of this embodiment, X¹⁶ is pra. In another class of this embodiment, X¹⁶ is Acb.

In another class of this embodiment, X¹⁷ is Arginine. In another class of this embodiment, X¹⁷ is pra.

In another class of this embodiment, X²⁰ is Glutamine. In another class of this embodiment, X²⁰ is Nle(ϵ N₃). In another class of this embodiment, X²⁰ is pra.

5 In another class of this embodiment, X²¹ is Aspartic acid. In another class of this embodiment, X²¹ is Nle(ϵ N₃).

In another class of this embodiment, X²⁴ is Glutamine. In another class of this embodiment, X²⁴ is Nle(ϵ N₃). In another class of this embodiment, X²⁴ is pra. In another class of this embodiment, X²⁴ is Acb.

10 In another class of this embodiment, X²⁷ is Leucine. In another class of this embodiment, X²⁷ is Methionine. In another class of this embodiment, X²⁷ is Norleucine. In another class of this embodiment, X²⁷ is L-Methionine sulphone.

In another class of this embodiment, X²⁸ is Aspartic acid. In another class of this embodiment, X²⁸ is Nle(ϵ N₃). In another class of this embodiment, X²⁸ is pra.

15 In another class of this embodiment, X³⁰ is absent. In another class of this embodiment, X³⁰ is Lysine linked at the C-terminus to gamma-Glutamic acid.

In another class of this embodiment, Nle(ϵ N₃) and pra cyclize to form a triazole containing ring.

20 In another class of this embodiment, Peg₃N₃Ala and pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide contains at one Nle(ϵ N₃) and one pra.

In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring, or the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

25 In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

30 In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

In another class of this embodiment, the peptide has the amino acid sequence of SEQ ID NO: 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, or 28.

5 The present invention further provides a pharmaceutical composition comprising a peptide having the amino acid sequence

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO: 29) wherein

X² is alpha-aminoisobutyric acid (Aib), or D-Serine;

10 X¹⁰ is Lysine, or Lysine conjugated to a fatty acid;

X¹⁶ is alpha-aminoisobutyric acid (Aib), Alanine, Glutamic acid, pra or 1-aminocyclobutane-1-carboxylic acid (Acb);

X¹⁷ is Arginine, or pra;

X²⁰ is Glutamine, Nle(εN₃), or pra;

15 X²¹ is Aspartic acid, or Nle(εN₃);

X²⁴ is Glutamine, Nle(εN₃), pra or 1-aminocyclobutane-1-carboxylic acid (Acb);

X²⁷ is Leucine, Methionine, Norleucine, or L-Methionine sulphone;

X²⁸ is Aspartic acid, Nle(εN₃), or pra;

X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid;

20 provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra; wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring;

wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(εN₃) is 6-Azido-L-norleucine,

Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-

25 ynoic acid; and wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.

In another class of this embodiment, the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid. In another class of this embodiment, the fatty acid comprises
30 a C16 or C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C18 fatty acid. In another class of this embodiment, the fatty acid comprises a C16 fatty acid.

In another class of this embodiment, X¹⁰ is Lysine. In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid.

In another class of this embodiment, X¹⁰ is Lysine, or Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

5 In another class of this embodiment, X¹⁰ is Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

10 In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 or C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine conjugated to a C18 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X¹⁰ is Lysine or Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

15 In another class of this embodiment, X¹⁰ is Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker.

In another class of this embodiment, X² is alpha-aminoisobutyric acid. In another class of this embodiment, X² is D-Serine.

20 In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, Alanine, Glutamic acid, pra or Acb. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid, or Alanine. In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In another class of this embodiment, X¹⁶ is Alanine. In another class of this embodiment, X¹⁶ is Glutamic acid. In another class of this embodiment, X¹⁶ is pra. In another class of this embodiment, X¹⁶ is Acb.

25 In another class of this embodiment, X¹⁷ is Arginine. In another class of this embodiment, X¹⁷ is pra.

In another class of this embodiment, X²⁰ is Glutamine. In another class of this embodiment, X²⁰ is Nle(εN₃). In another class of this embodiment, X²⁰ is pra.

30 In another class of this embodiment, X²¹ is Aspartic acid. In another class of this embodiment, X²¹ is Nle(εN₃).

In another class of this embodiment, X²⁴ is Glutamine. In another class of this embodiment, X²⁴ is Nle(ϵ N₃). In another class of this embodiment, X²⁴ is pra. In another class of this embodiment, X²⁴ is Acb.

5 In another class of this embodiment, X²⁷ is Leucine. In another class of this embodiment, X²⁷ is Methionine. In another class of this embodiment, X²⁷ is Norleucine. In another class of this embodiment, X²⁷ is L-Methionine sulphone.

In another class of this embodiment, X²⁸ is Aspartic acid. In another class of this embodiment, X²⁸ is Nle(ϵ N₃). In another class of this embodiment, X²⁸ is pra.

10 In another class of this embodiment, X³⁰ is absent. In another class of this embodiment, X³⁰ is Lysine linked at the C-terminus to gamma-Glutamic acid.

In another class of this embodiment, Nle(ϵ N₃) and pra cyclize to form a triazole containing ring.

In another class of this embodiment, Peg₃N₃Ala and pra cyclize to form a triazole containing ring.

15 In another class of this embodiment, the peptide contains at one Nle(ϵ N₃) and one pra.

In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring, or the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

20 In another class of this embodiment, the azide of Nle(ϵ N₃) and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the azide of Peg₃N₃Ala and the alkyne of pra cyclize to form a triazole containing ring.

In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

25 In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

In another class of this embodiment, the peptide has the amino acid sequence of SEQ ID NO: 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, or 28.

30 The aforementioned GCG/GLP-1 receptor co-agonist peptides have the structure as shown in Table 1.

In another embodiment, the present invention provides a pharmaceutical composition comprising a peptide having the amino acid sequence

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO:

29), wherein

X² is alpha-aminoisobutyric acid, or D-Serine;

X¹⁰ is Lysine or Lysine conjugated to a gamma-Glutamic acid-gamma Glutamic acid – C16

5 fatty acid;

X¹⁶ is alpha-aminoisobutyric acid (Aib), or Alanine;

X¹⁷ is Arginine;

X²⁰ is Glutamine;

X²¹ is Aspartic acid;

10 X²⁴ is pra;

X²⁷ is Leucine, or Norleucine;

X²⁸ is Nle(εN₃);

X³⁰ is absent;

wherein Nle(εN₃) and pra cyclize to form a triazole containing ring;

15 wherein Nle(εN₃) is 6-Azido-L-norleucine, and pra is (R)-2-aminopent-4-ynoic acid; and

wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide; or a pharmaceutically acceptable salt thereof.

In a class of this embodiment, X² is alpha-aminoisobutyric acid. In another embodiment of the present invention, X² is D-Serine.

20 In another class of this embodiment, X¹⁰ is Lysine. In another class of this embodiment, X¹⁰ is Lysine conjugated to a gamma-Glutamic acid-gamma Glutamic acid – C16.

In another class of this embodiment, X¹⁶ is alpha-aminoisobutyric acid. In another embodiment, X¹⁶ is Alanine.

25 In another class of this embodiment, X²⁷ is Leucine. In another class of this embodiment, X²⁷ is Norleucine.

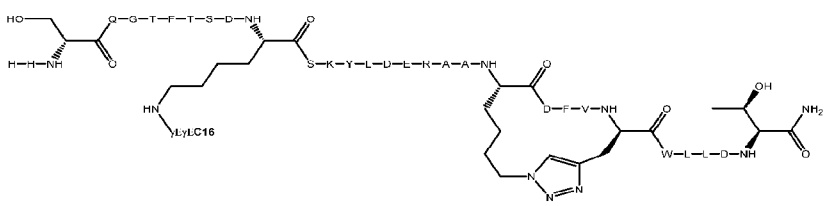
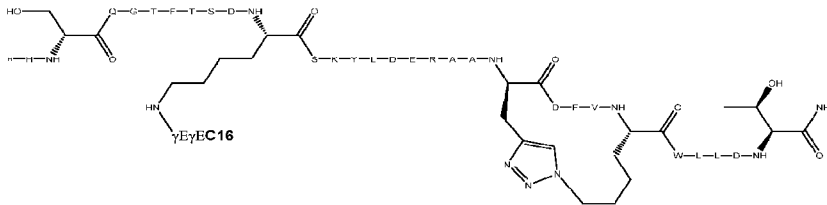
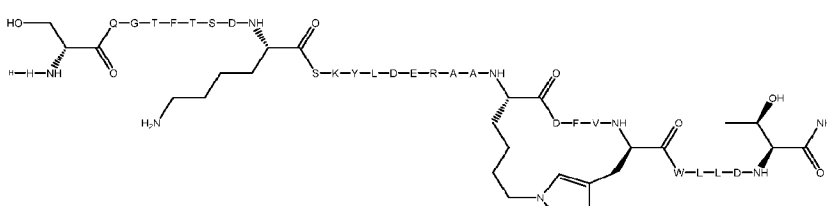
In another class of this embodiment, the azide of Nle(εN₃) and the alkyne of pra cyclize to form a triazole containing ring.

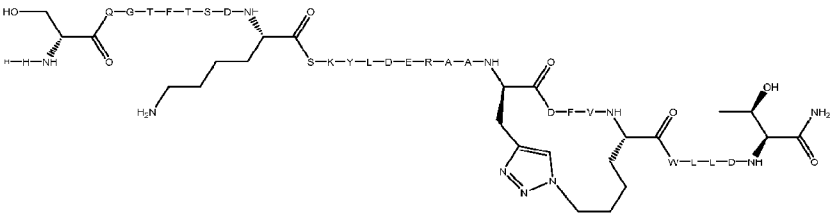
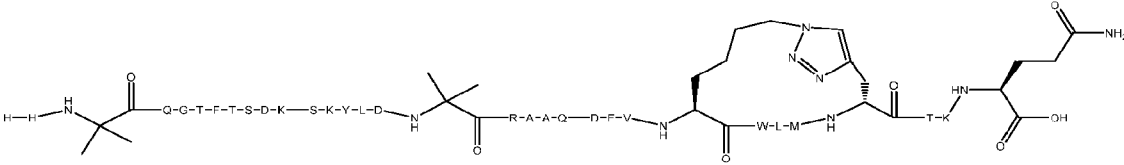
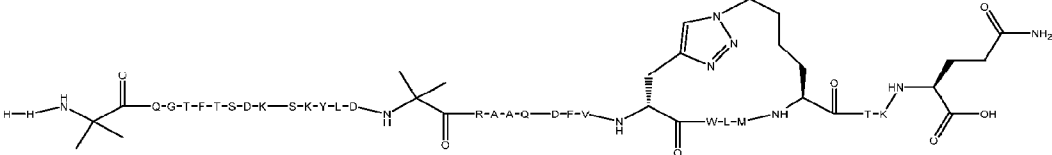
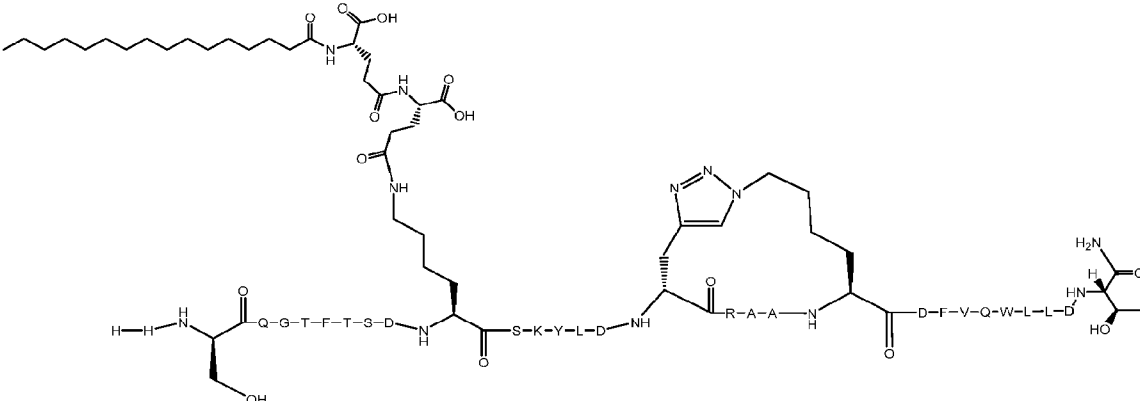
In another class of this embodiment, the peptide includes a protecting group that is joined to the C-terminal carboxy group of the peptide.

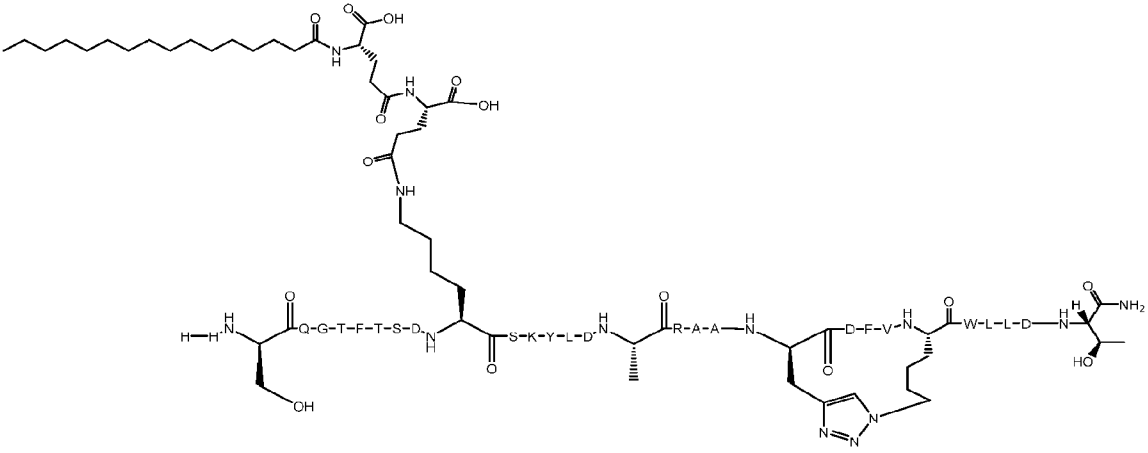
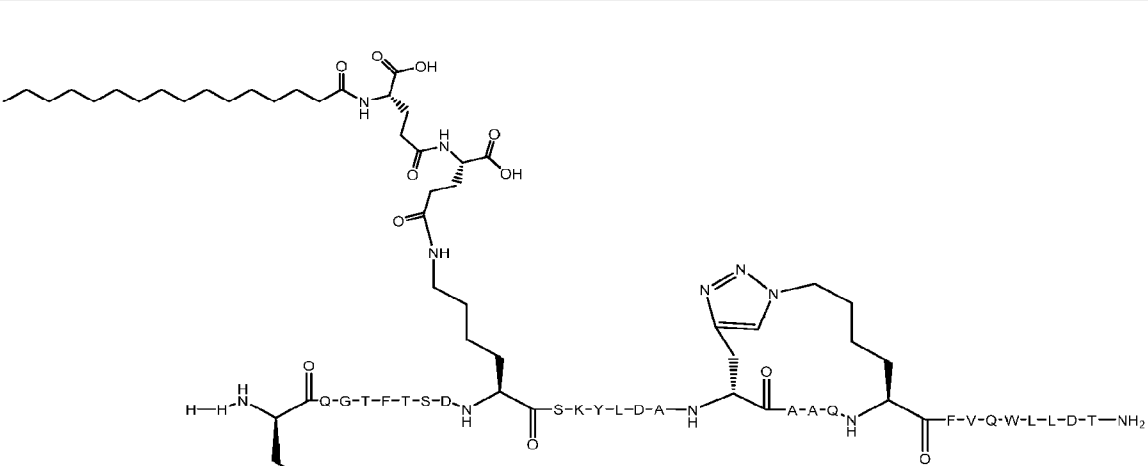
In another class of this embodiment, the peptide does not include a protecting group that is joined to the C-terminal carboxy group.

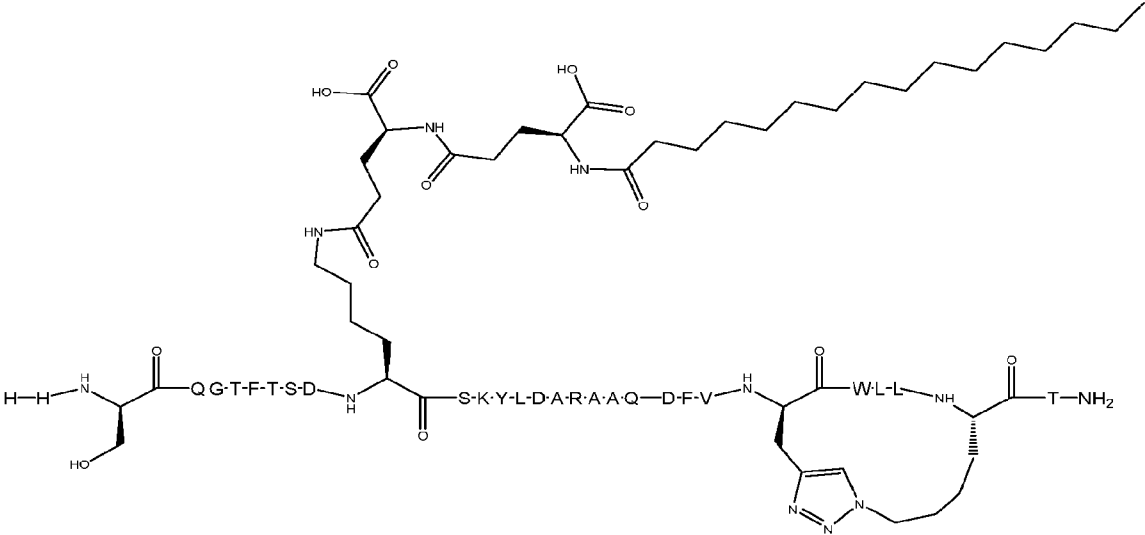
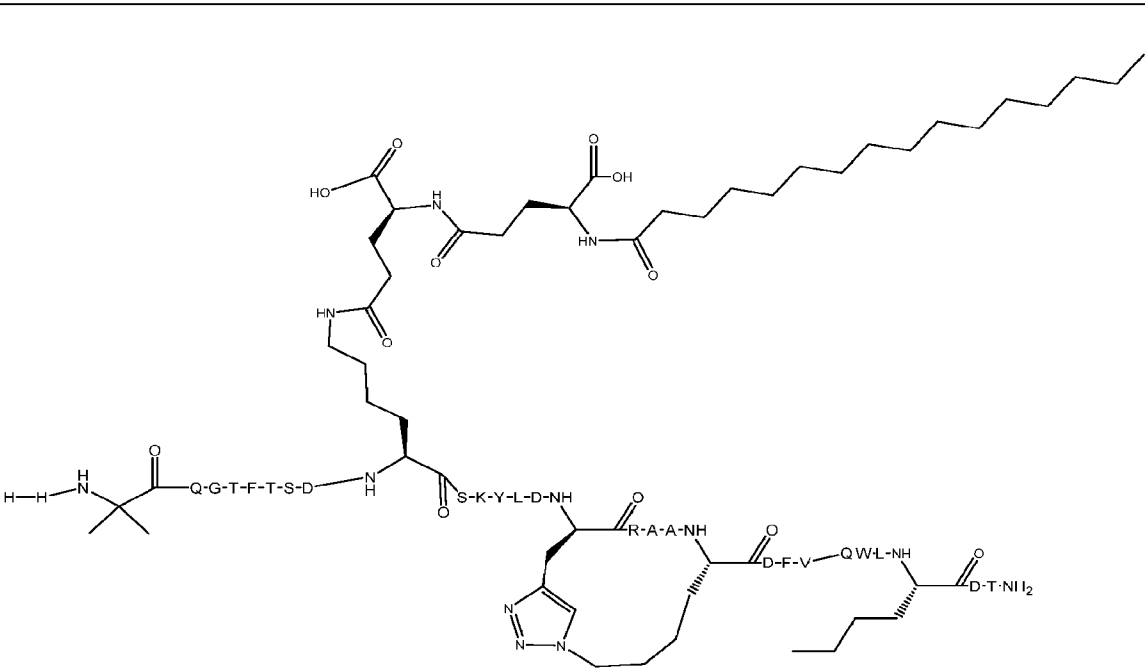
Conjugates, fusion proteins and multimers of any of the peptide sequences disclosed herein are also contemplated.

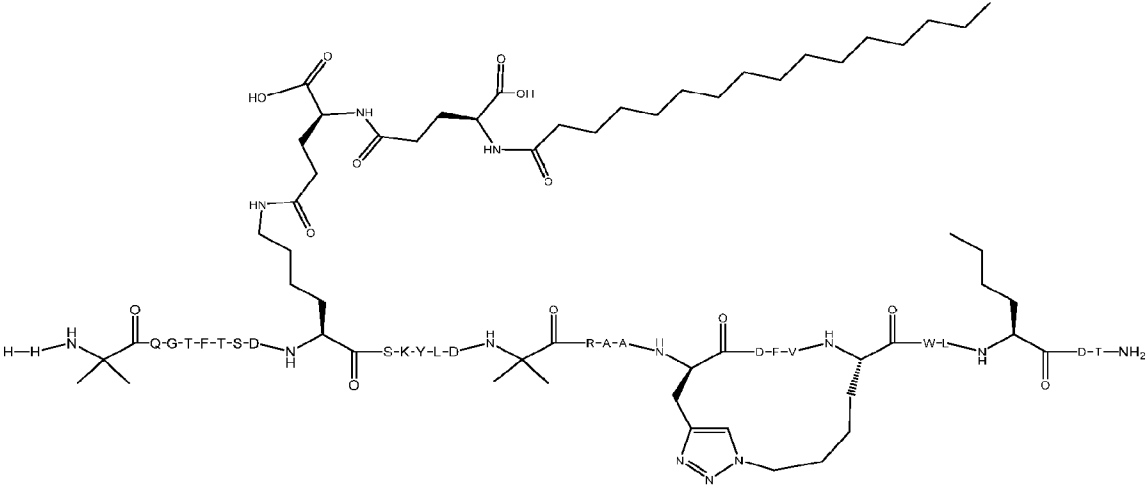
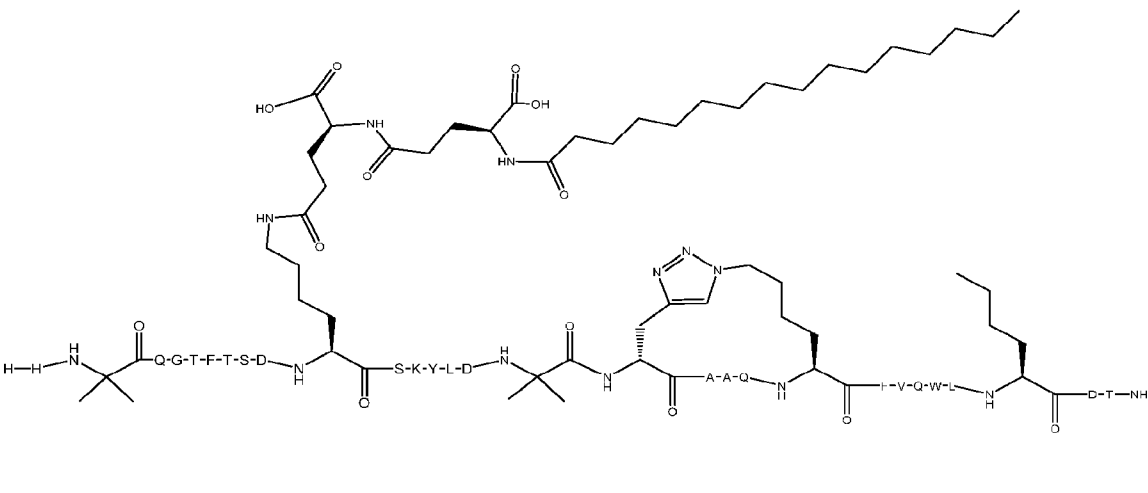
5 Examples GCG/GLP-1 receptor co-agonist peptides within the scope of the invention are disclosed in Table 1.

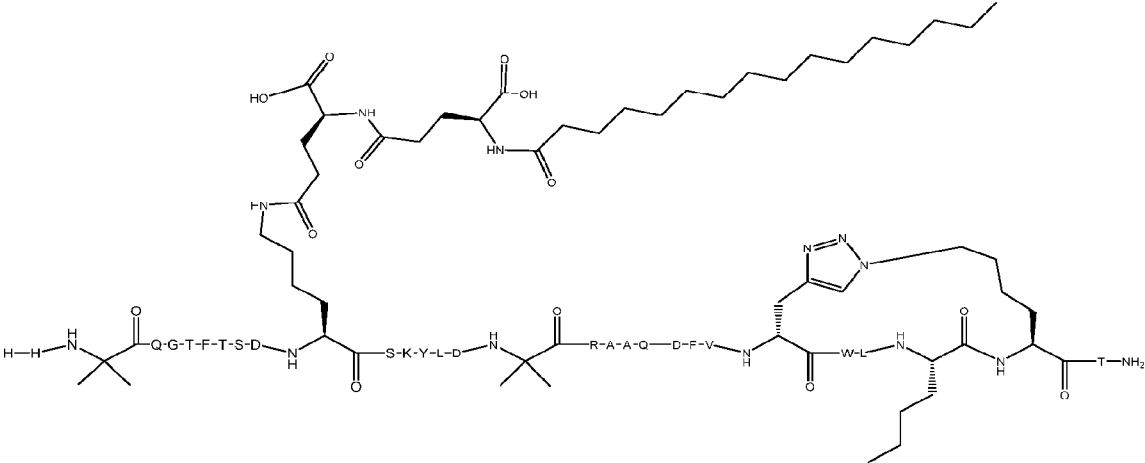
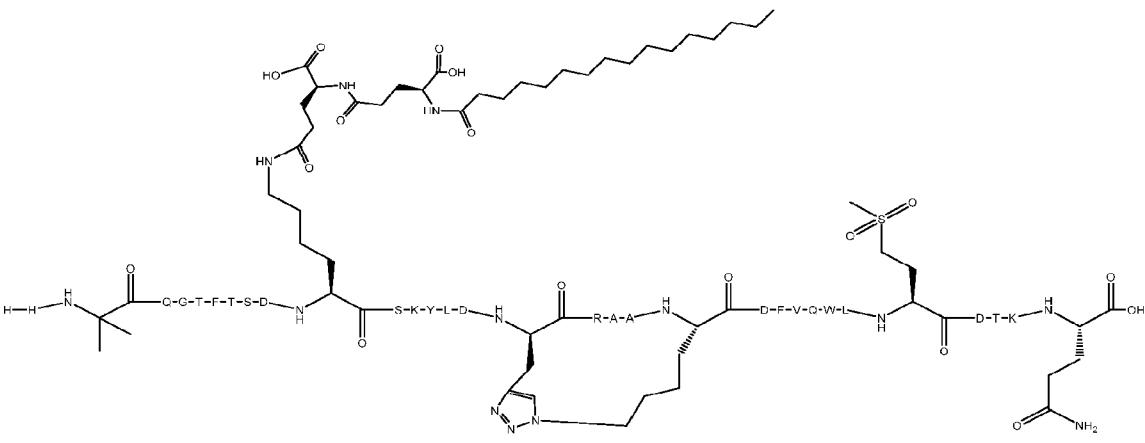
Table 1		
SEQ ID NO:	ID	SEQUENCE
6	TP487	 HsQGTFTSDK(γEγEC16)SKYLDERAANle(εN3)*DFVpra*WLLDT-NH₂
7	TP488	 HsQGTFTSDK(γEγEC16)SKYLDERAApra*DFVNle(εN3)*WLLDT-NH₂
8	TP530	 HsQGTFTSDKSKYLDERAANle(εN3)*DFVpra*WLLDT-NH₂
9	TP531	

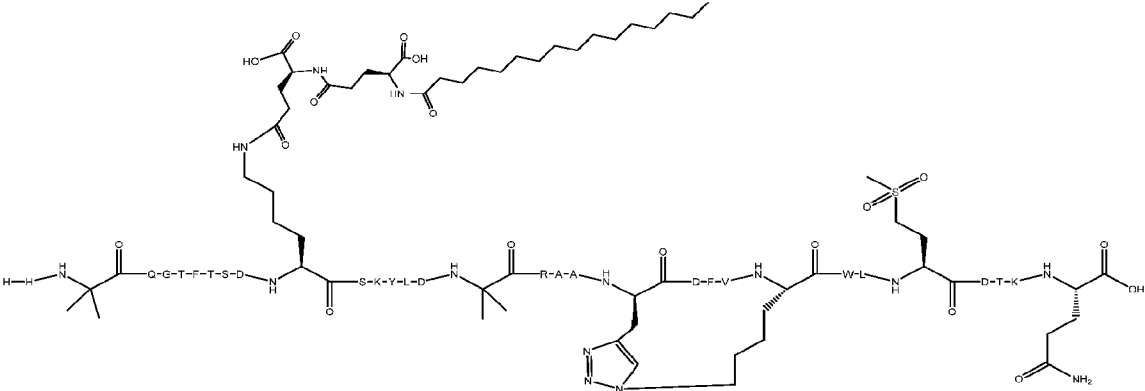
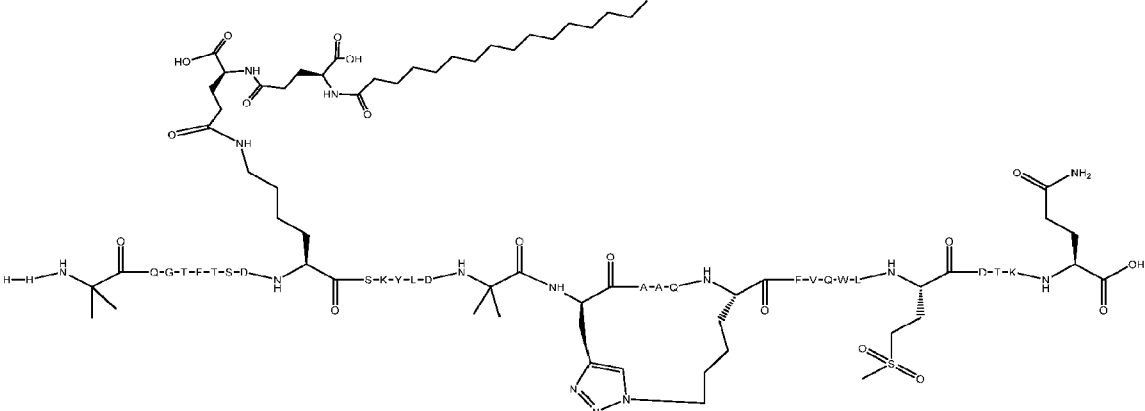
		 HsQGTFTSDKSKYLDERAApra*DFVNle(εN₃)*WLLDT-NH₂
10	TP532	 HUQGTFTSDKSKYLDURAAQDFVNle(εN₃)*WLMpra*TKγE-NH₂
11	TP533	 HUQGTFTSDKSKYLDURAAQDFVpra*WLMNle(εN₃)*TKγE-NH₂
12	TP731	 HsQGTFTSDK(γEγEC16)SKYLDpra*RAANle(εN₃)*DFVQWLLDT-NH₂

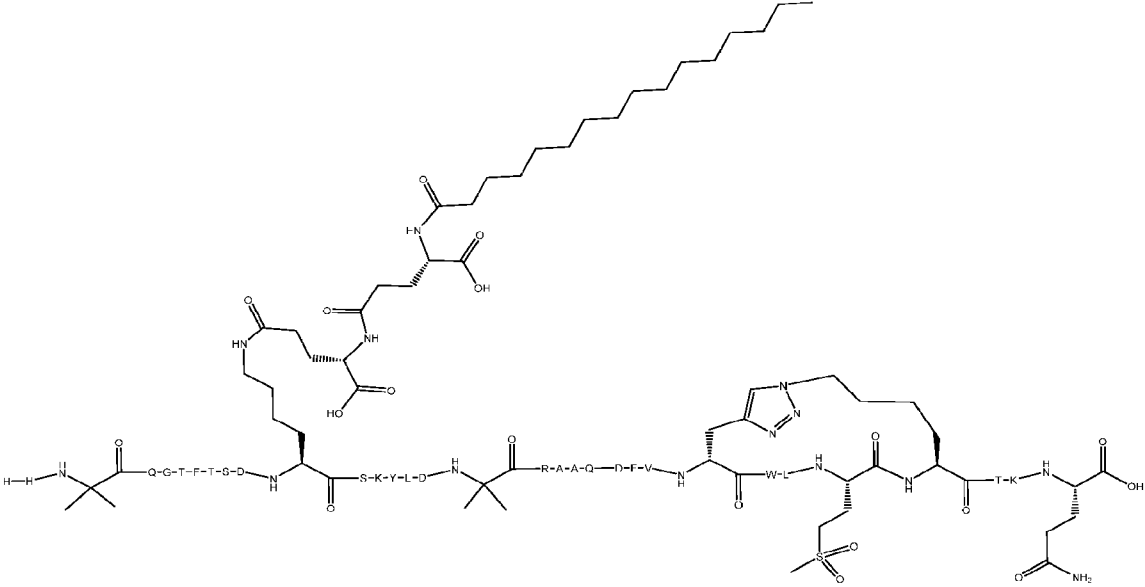
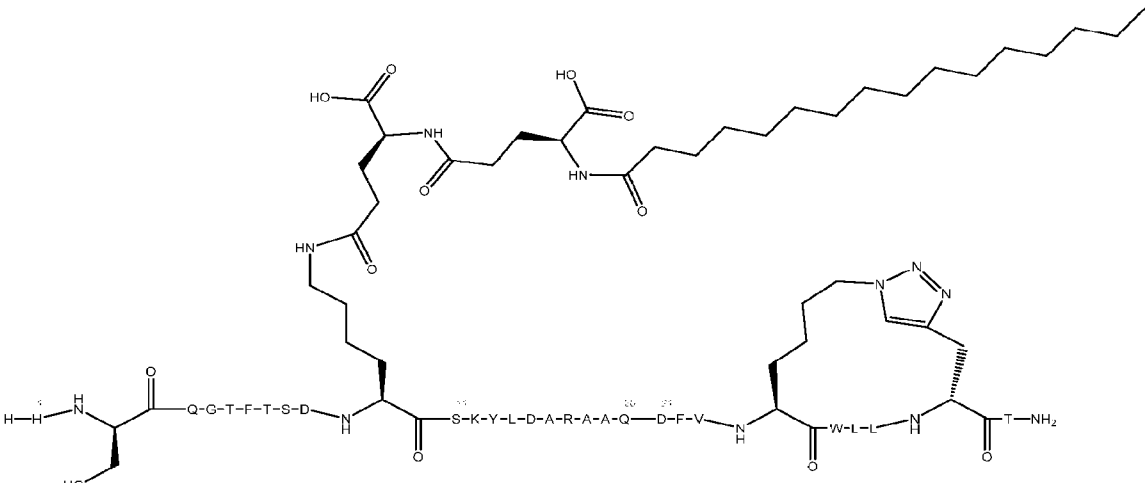
13	TP732	 HsQGTFTSDK(γEγEC16)SKYLDARAApra*DFVNle(ϵN3)*WLLDT-NH₂
14	TP733	 HsQGTFTSDK(γEγEC16)SKYLDApra*AAQNle(ϵN3)*FVQWLLDT-NH₂

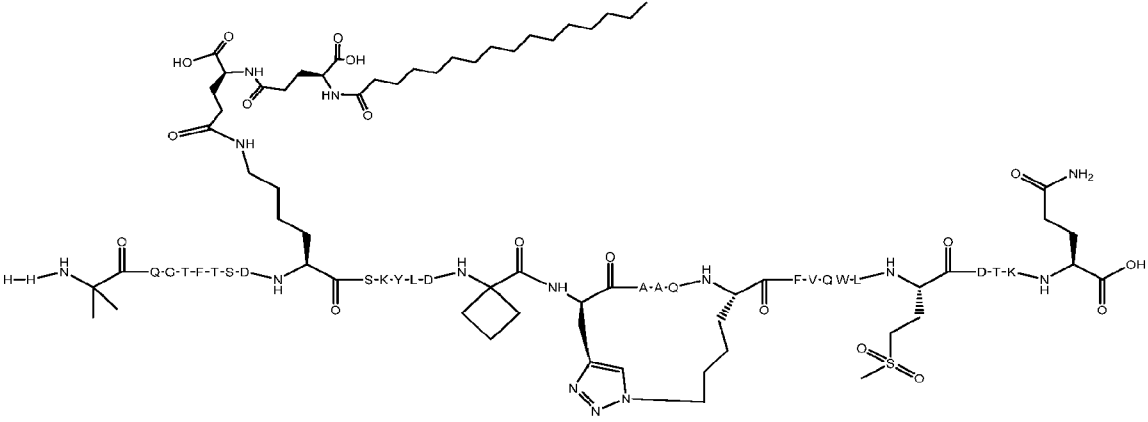
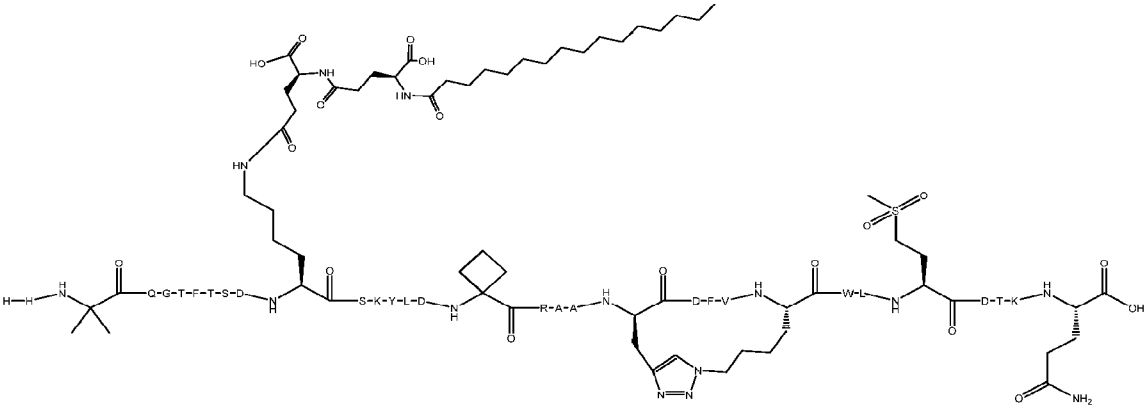
15	TP835	 HsQGTFTSDK(γEγEC16)SKYLDARAAQDFVpra*WLLNle(ϵN3)*T-NH₂
16	TP837	 HUQGTFTSDK(γEγEC16)SKYLDpra*RAANle(ϵN3)*DFVQWLNleDT-NH₂
17	TP839	

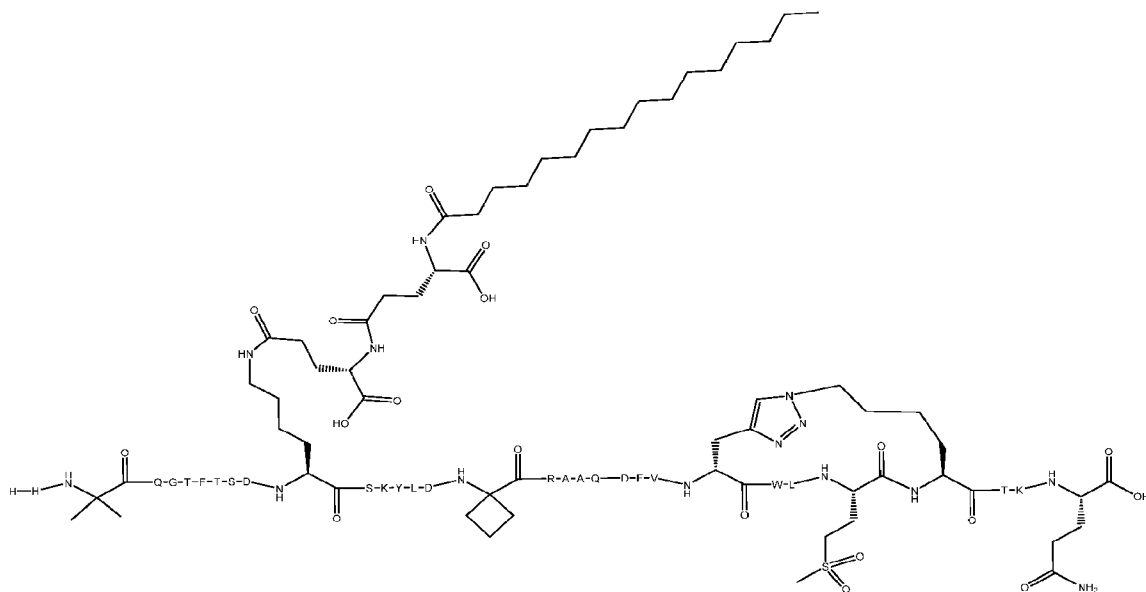
		 HUQGTFTSDK(γEγEC16)SKYLDURAApra*DFVNle(εN3)*WLNleDT-NH2
18	TP841	 HUQGTFTSDK(γEγEC16)SKYLDUpa*AAQNle(εN3)*FVQWLNleDT-NH2
19	TP843	

		 Chemical structure of peptide HUQGTFTSDK(γEγEC16)SKYLDURAAQDFVpra*WLNleNle(εN3)*T-NH2.
20	TP845	 Chemical structure of peptide HUQGTFTSDK(γEγEC16)SKYLDpra*RAANle(εN3)*DFVQWL2DTKγE-NH2.
21	TP847	

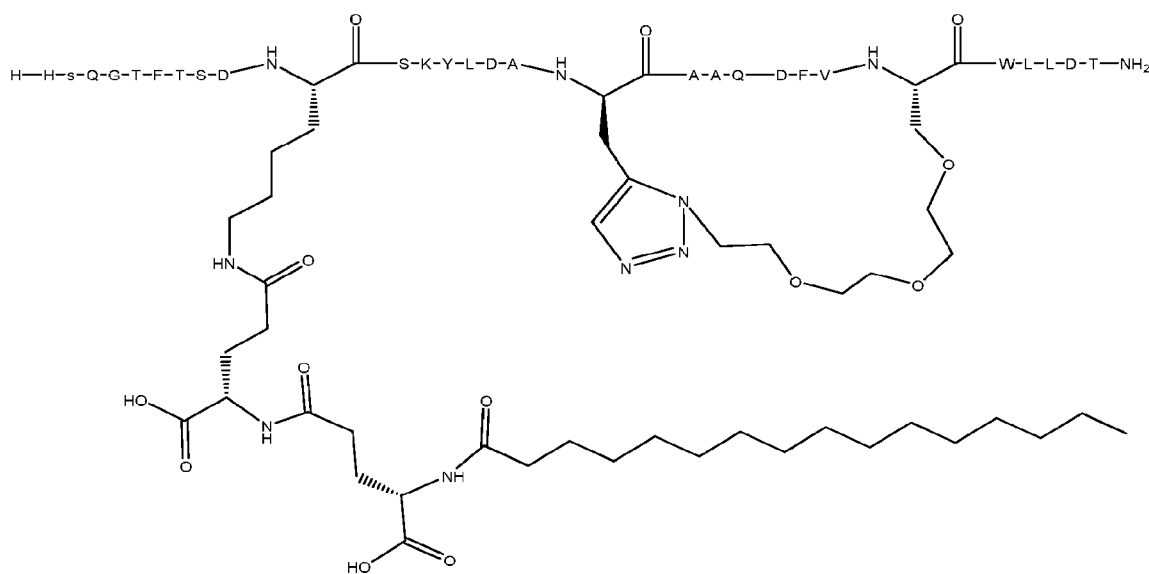
		 Chemical structure of peptide HUQGTFTSDK(γEγEC16)SKYLDURAApra*DFVNle(εN3)*WL2DTKγE-NH₂.
22	TP849	 Chemical structure of peptide HUQGTFTSDK(γEγEC16)SKYLDUpa*AAQNle(εN3)*FVQWL2DTKγE-NH₂.
23	TP851	

		 HUQGTFTSDK(γEγEC16)SKYLDURAAQDFVpra*WL2Nle(εN3)*TKγE-NH₂
24	TP852	 HsQGTFTSDK(γEγEC16)SKYLDARAAQDFVNle(εN3)*WLLpra*T-NH₂
25	TP858	

		 HUQGTFTSDK(γEγEC16)SKYLDAcbp*AAQNle(ϵN3)*FVQWL2DTKγE-NH₂
26	TP860	 HUQGTFTSDK(γEγEC16)SKYLDAcbRAApra*DFVNle(ϵN3)*WL2DTKγE-NH₂
27	TP862	



HUQGTFTSDK(γ E γ EC16)SKYLDAcbRAAQDFVpra*WL2Nle(ϵ N3)*TK γ E-NH₂



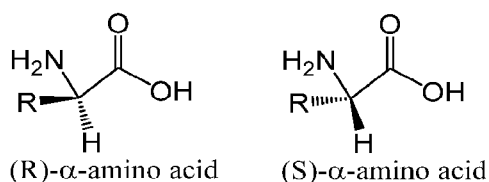
HsQGTFTSDK(γ E γ EC16)SKYLDApra*AAQDFVPeg₃N₃Ala*WLLDT-NH₂

Table legend : U– alpha-aminoisobutyric acid; s–D-serine; γ E– γ -glutamic acid; γ E γ E – γ -glutamic acid - γ -glutamic acid; Acb =1-aminocyclobutane-1-carboxylic acid; pra = (R)-2-aminopent-4-ynoic acid; Nle(ϵ N₃)= 6-Azido-L-

norleucine; Nle = norleucine; Peg₃N₃Ala = O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine; 2= L-methionine sulphone; C16 = -CO-(CH₂)₁₅; X* = amino acids cyclized to form a triazole containing ring; NH₂ = C-terminal amide

The present invention further includes compositions comprising or consisting of one or more of the peptides shown in Table 1 and a pharmaceutically acceptable carrier.

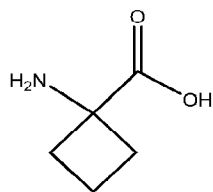
" α -amino acid" or simply "amino acid" refers to a molecule containing both an amino group and a carboxyl group bound to a carbon, which is designated the α -carbon, attached to a side chain (R group) and a hydrogen atom and may be represented by the formula shown for (R) and (S) α -amino acids



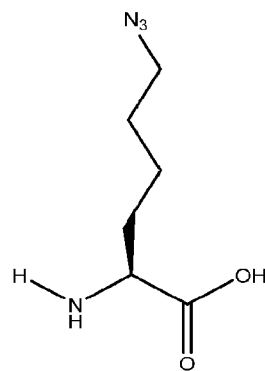
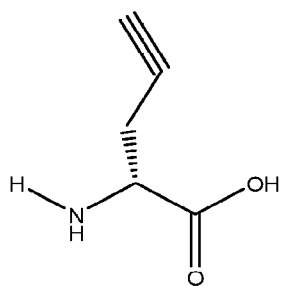
In general, L-amino acids have an (S) configuration except for cysteine, which has an (R) configuration, and glycine, which is achiral. Suitable α -amino acids for the all-D configuration peptides disclosed herein include only the D-isomers of the naturally-occurring amino acids and analogs thereof, as well as non-naturally occurring amino acids prepared by organic synthesis or other metabolic routes except for α,α -disubstituted amino acids, which may be L, D, or achiral. Unless the context specifically indicates otherwise, the term amino acid, as used herein, is intended to include amino acid analogs. As used herein, D amino acids are denoted by the superscript "D" (e.g., ^DLeu) and L amino acids by "L" (e.g., L-Leu) or no L identifier (e.g., Leu).

" α,α -disubstituted amino acid" refers to a molecule or moiety containing both an amino group and a carboxyl group bound to the α -carbon that is attached to two natural or non-natural amino acid side chains, or combination thereof. Exemplary α,α -disubstituted amino acids are shown below. These α,α -disubstituted amino acids comprise a side chain with a terminal olefinic reactive group.

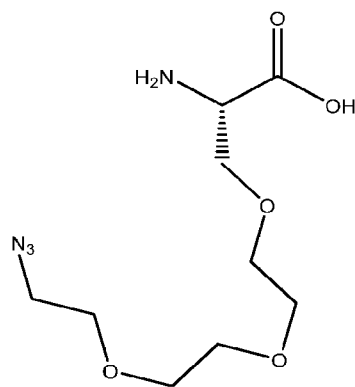
The aforementioned amino acids used for introducing the staple by ring closing metathesis have the following structures:



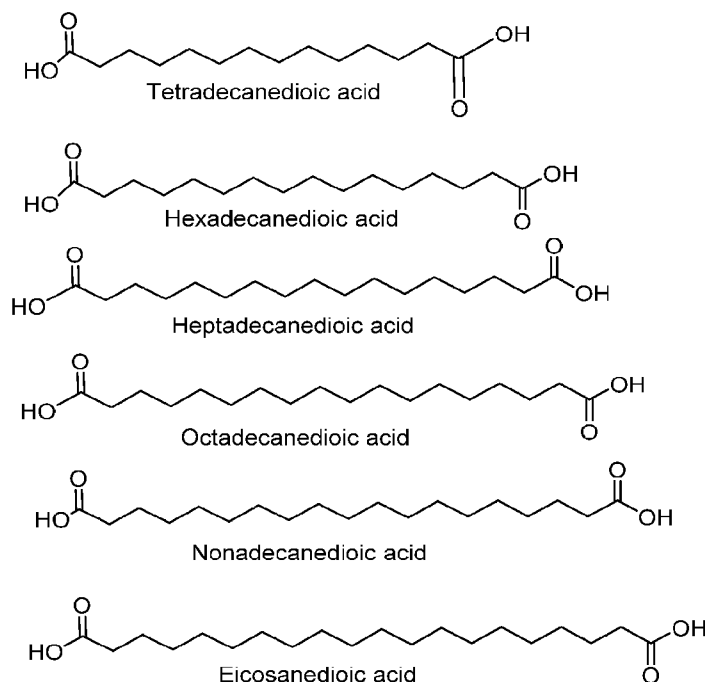
Acb

Nle(ϵ N₃)

pra

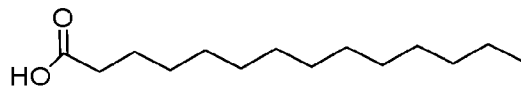
Peg₃N₃Ala

- 5 The co-agonist peptides of the present invention may be conjugated to an α,ω -dicarboxylic acid comprising an aliphatic chain of 14 to 20 methylene groups (fatty diacid) wherein one end of the molecule is the proximal end and the other end is the distal end and wherein the proximal end and the distal end both have a carboxyl (COOH) group. The fatty diacid may be represented by the structure $\text{HO}_2\text{C}(\text{CH}_2)_n\text{CO}_2\text{H}$, wherein n is 11, 12, 13, 14, 15,
- 10 16, 17, or 18 to provide fatty diacids Tetradecanedioic acid, Hexadecanedioic acid, Heptadecanedioic acid, Octadecanedioic acid, Nonadecanedioic acid, and Eicosanedioic acid, respectively. The aforementioned fatty diacids have the following structures

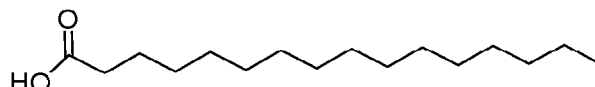


As a component of the co-agonist peptide, the acid functionality at the proximal end of the fatty diacid is conjugated to the amino group of a linker in a C(O)-NH linkage and the acid functionality at the distal end of the fatty diacid is a free carboxyl group (COOH). The COOH group at the distal end helps confer a longer half-life to the co-agonist peptide by its ability to non-covalently bind to serum albumin, a known carrier for fatty acids in serum. The COOH group enhances duration of action as it provides a better non-covalent interaction with serum albumin than peptides that have been acylated using a fatty acid, which bind serum albumin less efficiently and form a less stable non-covalent interaction with the serum albumin.

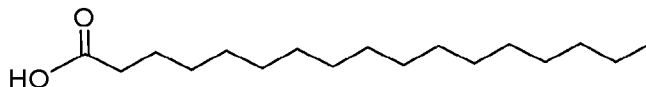
The co-agonist peptides of the present invention may also be conjugated to a carboxylic acid comprising an aliphatic chain of 14 to 20 methylene groups (fatty acid) wherein one end of the molecule is the proximal end and the other end is the distal end and wherein the proximal end or the distal end has a carboxyl (COOH) group. The fatty acid may be represented by the structure $\text{HO}_2\text{C}(\text{CH}_2)_n\text{CH}_3$, wherein n is 11, 12, 13, 14, 15, 16, 17, or 18 to provide fatty acids Tetradecanoic acid, Hexadecanoic acid, Heptadecanoic acid, Octadecanoic acid, Nonadecanoic acid, and Eicosanoic acid, respectively. The fatty acid may have one of the following structures



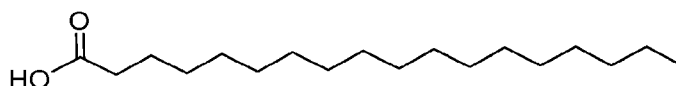
Tetradecanoic acid



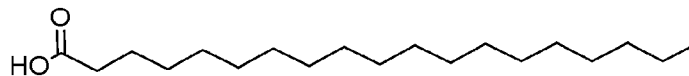
Hexadecanoic acid



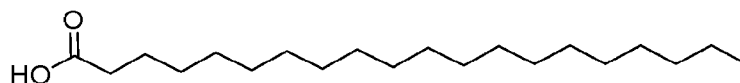
Heptadecanoic acid



Octadecanoic acid



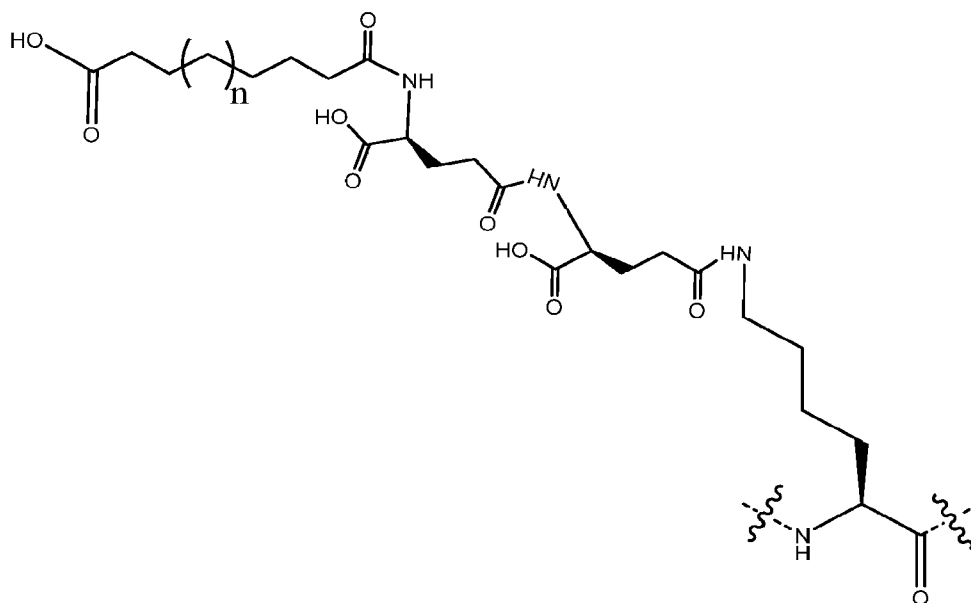
Nonadecanoic acid



Eicosanoic acid

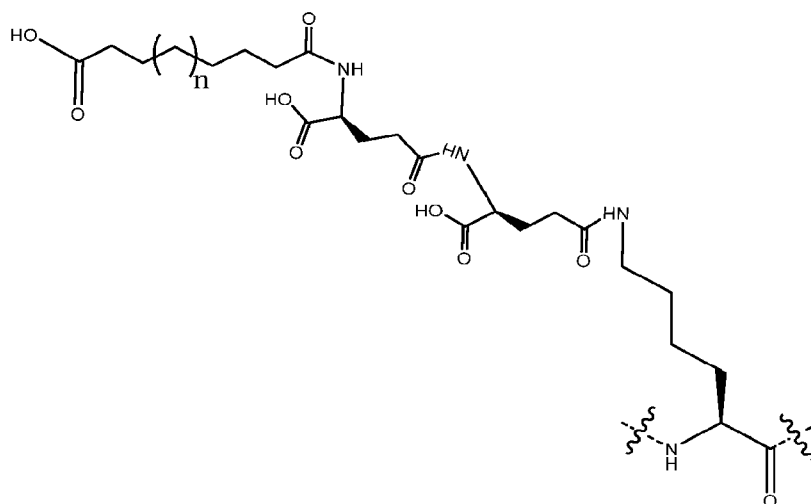
- In particular aspects, the GCG/GLP-1 receptor co-agonist peptide is further conjugated to a fatty acid at position 10 of the peptide. The fatty acid may be represented by the structure
- 5 $\text{HO}_2\text{C}(\text{CH}_2)_n$ wherein n is 11, 12, 13, 14, 15, 16, 17, 18, or 19.

The structure of $\text{K}(\gamma\text{E}\gamma\text{E-fatty acid})$ wherein the linker is $\gamma\text{E}\gamma\text{E}$ and the fatty acid component comprises C14, C16, C17, C18, C19, or C20 is represented by



wherein n is 7, 9, 10, 11, 12, 13, or 14, respectively, and the wavy lines represent the bonds between adjacent amino acids in the co-agonist peptide sequence.

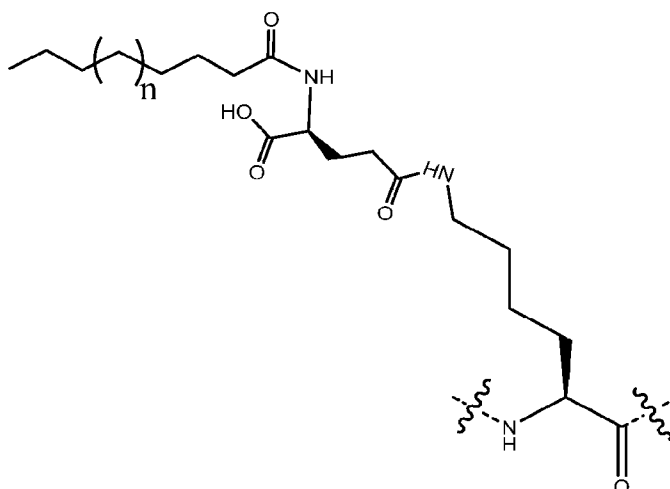
In the peptides shown herein, the structure of K(γ E γ E-C16) may be represented by



5

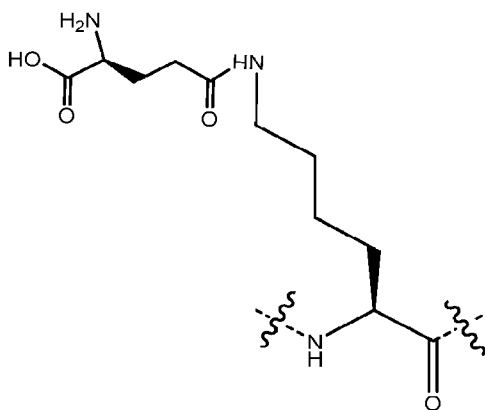
wherein n is 9 and the wavy lines represent the bonds between adjacent amino acids in the peptide sequence.

In the peptides shown herein, the structure of K(γ E-C16) may be represented by



wherein n is 9 and the wavy lines represent the bonds between adjacent amino acids in the peptide sequence.

The structure of K γ E at position 30 in the co-agonist peptide is represented by



5

wherein the wavy lines represent the bonds between adjacent amino acids in the co-agonist peptide sequence.

The stapled GCG/GLP-1 receptor co-agonist peptides of the present invention have measurable activity at the glucagon receptor and/or the GLP-1 receptor.

10 The co-agonist peptides disclosed herein may have anywhere from at least about 1% (including at least about 1.5%, 2%, 5%, 7%, 10%, 20%, 30%, 40%, 50%, 60%, 75%, 100%, 125%, 150%, 175%) to about 200% or higher activity at the GLP-1 receptor relative to native GLP-1 and anywhere from at least about 1% (including about 1.5%, 2%, 5%, 7%, 10%, 20%, 30%, 40%, 50%, 60%, 75%, 100%, 125%, 150%, 175%, 200%, 250%, 300%, 350%, 400%,
15 450%) to about 500% or higher activity at the glucagon receptor relative to native glucagon. In some embodiments, the co-agonist peptides described herein exhibit no more than about 100%.

1000%, 10,000%, 100,000%, or 1,000,000% of the activity of native glucagon at the glucagon receptor. In some embodiments, the co-agonist peptides described herein exhibit no more than about 100%, 1000%, 10,000%, 100,000%, or 1,000,000% of the activity of native GLP-1 at the GLP-1 receptor. In exemplary embodiments, a co-agonist peptide may exhibit at least 10% of
5 the activity of native glucagon at the glucagon receptor and at least 50% of the activity of native GLP-1 at the GLP-1 receptor, or at least 40% of the activity of native glucagon at the glucagon receptor and at least 40% of the activity of native GLP-1 at the GLP-1 receptor, or at least 60% of the activity of native glucagon at the glucagon receptor and at least 60% of the activity of native GLP-1 at the GLP-1 receptor.

10 The present invention further provides a method for treating a patient for metabolic disease comprising administering the patient an effective amount of the peptide of any one of the aforementioned peptides to treat the metabolic disease in the patient.

The present invention further provides method for treating a patient for metabolic disease comprising administering the patient an effective amount of the composition of the
15 aforementioned compositions to treat the metabolic disease in the patient.

In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity.

In particular aspects, the diabetes is Type I diabetes, Type II diabetes, or gestational diabetes.

20 In particular aspects, the patient has more than one metabolic disease, for example, diabetes and NASH, NAFLD, or obesity; obesity and NASH or NAFLD; diabetes, NASH, and obesity; diabetes, NAFLD, and obesity; or diabetes and obesity.

The present invention further provides for the use of any one of the aforementioned peptides for manufacture of a medicament for the treatment of metabolic disease.

25 The present invention further provides for the use of any one of the aforementioned compositions for manufacture of a medicament for the treatment of metabolic disease.

In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity.

In particular aspects, the diabetes is Type I diabetes, Type II diabetes, or gestational
30 diabetes.

In particular aspects, the medicament is for treatment of more than one metabolic disease, for example, diabetes and NASH, NAFLD, or obesity; obesity and NASH or NAFLD; diabetes, NASH, and obesity; diabetes, NAFLD, and obesity; or diabetes and obesity.

In particular aspects of the compounds disclosed herein the C-terminal protecting group may be an amide or ester. For example, the carboxylic acid of the C-terminal amino acid is replaced with a charge-neutral group, such as an amide or ester.

Further provided is method for treating a metabolic disease in a patient or individual
5 comprising: administering to the patient or individual an effective amount of any one of the
aforementioned compositions comprising a co-agonist peptide and administering to the patient or
individual an effective amount of a composition comprising an insulin or insulin analog to treat
the metabolic disease in the patient or individual.

In particular aspects, the composition comprising the co-agonist peptide is administered
10 at a time prior to the time the composition comprising the insulin or insulin analog is
administered. In another aspect, the composition comprising the insulin or insulin analog is
administered at a time prior to the time the composition comprising the co-agonist peptide is
administered. In a further still aspect, the composition comprising the co-agonist peptide is
administered at the same time as the composition comprising the insulin or insulin analog is
15 administered.

In particular aspects, the insulin analog is insulin detemir, insulin glargine, insulin
levemir, insulin glulisine, or insulin lispro.

In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease
(NAFLD), non-alcoholic steatohepatitis (NASH), or obesity.

20 In particular aspects, the diabetes is Type I diabetes, Type II diabetes, or gestational
diabetes.

In particular aspects, the patient has more than one metabolic disease, for example,
diabetes and NASH, NAFLD, or obesity; obesity and NASH or NAFLD; diabetes, NASH, and
obesity; diabetes, NAFLD, and obesity; or diabetes and obesity.

25 The present invention further provides a composition comprising any one of the
aforementioned peptides; an insulin or insulin analog; and, a pharmaceutically acceptable carrier.

The present invention further provides for the use of a composition comprising any one
of the aforementioned peptides; an insulin or insulin analog; and, a pharmaceutically acceptable
carrier for the treatment of a metabolic disease.

30 In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease
(NAFLD), non-alcoholic steatohepatitis (NASH), or obesity. In further aspects, the diabetes is
Type I diabetes, Type II diabetes, or gestational diabetes.

The present invention further provides for the use of a composition comprising any one of the aforementioned peptides; an insulin or insulin analog; and, a pharmaceutically acceptable carrier for the manufacture of a medicament for the treatment of a metabolic disease.

In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity. In further aspects, the diabetes is
5 Type I diabetes, Type II diabetes, or gestational diabetes.

Definitions

The term "about" as used herein means greater or lesser than the value or range of values stated by 10 percent, but is not intended to designate any value or range of values to only this
10 broader definition. Each value or range of values preceded by the term "about" is also intended to encompass the embodiment of the stated absolute value or range of values.

The term "individual" is meant to include humans and companion or domesticated animals such as dogs, cats, horses, and the like. Therefore, the compositions comprising a compound or one or more co-agonist peptides as disclosed herein are also useful for treating or
15 preventing obesity and obesity-related disorders in cats and dogs. As such, the term "mammal" includes humans and companion animals such as cats and dogs.

As used herein, the term "pharmaceutically acceptable carrier" includes any carrier suitable for administering to an individual, for example any of the standard pharmaceutical carriers, including but not limited to a phosphate buffered saline solution, water, emulsions such
20 as an oil/water or water/oil emulsion, and various types of wetting agents. The term also encompasses any of the agents approved by a regulatory agency of the U.S. Federal government or listed in the U.S. Pharmacopeia for use in animals, including humans. In general, "pharmaceutically acceptable carrier" means a non-toxic material that does not interfere with the effectiveness of the biological activity of the active ingredient(s), approved by a regulatory
25 agency of the Federal or a state government or listed in the U.S. Pharmacopoeia or other generally recognized pharmacopoeia for use in animals and, more particularly, in humans. The term "carrier" refers to a diluent, adjuvant, excipient, or vehicle with which the therapeutic is administered and includes, but is not limited to such sterile liquids as water and oils. The characteristics of the carrier will depend on the route of administration.

30 As used herein the term "pharmaceutically acceptable salt" refers to salts of compounds that retain the biological activity of the parent compound, and which are not biologically or otherwise undesirable. Many of the compounds disclosed herein are capable of forming acid and/or base salts by virtue of the presence of amino and/or carboxyl groups or groups similar

thereto. Pharmaceutically acceptable base addition salts can be prepared from inorganic and organic bases. Salts derived from inorganic bases, include by way of example only, sodium, potassium, lithium, ammonium, calcium and magnesium salts. Salts derived from organic bases include, but are not limited to, salts of primary, secondary and tertiary amines.

- 5 Pharmaceutically acceptable salts may be prepared from pharmaceutically acceptable non-toxic bases or acids including inorganic or organic bases and inorganic or organic acids. Salts derived from inorganic bases include aluminum, ammonium, calcium, copper, ferric, ferrous, lithium, magnesium, manganic salts, manganous, potassium, sodium, zinc, and the like. Particularly preferred are the ammonium, calcium, magnesium, potassium, and sodium salts.
- 10 Salts derived from pharmaceutically acceptable organic non-toxic bases include salts of primary, secondary, and tertiary amines, substituted amines including naturally occurring substituted amines, cyclic amines, and basic ion exchange resins, such as arginine, betaine, caffeine, choline, N,N'-dibenzylethylenediamine, diethylamine, 2-diethylaminoethanol, 2-dimethylaminoethanol, ethanolamine, ethylenediamine, N-ethyl-morpholine, N-ethylpiperidine, glucamine,
- 15 glucosamine, histidine, hydrabamine, isopropylamine, lysine, methylglucamine, morpholine, piperazine, piperidine, polyamine resins, procaine, purines, theobromine, triethylamine, trimethylamine, tripropylamine, tromethamine, and the like. The term "pharmaceutically acceptable salt" further includes all acceptable salts such as acetate, lactobionate, benzenesulfonate, laurate, benzoate, malate, bicarbonate, maleate, bisulfate, mandelate,
- 20 bitartrate, mesylate, borate, methylbromide, bromide, methylnitrate, calcium edetate, methylsulfate, camsylate, mucate, carbonate, napsylate, chloride, nitrate, clavulanate, N-methylglucamine, citrate, ammonium salt, dihydrochloride, oleate, edetate, oxalate, edisylate, pamoate (embonate), estolate, palmitate, esylate, pantothenate, fumarate, phosphate/diphosphate, gluceptate, polygalacturonate, gluconate, salicylate, glutamate, stearate, glycolylarsanilate,
- 25 sulfate, hexylresorcinate, subacetate, hydrabamine, succinate, hydrobromide, tannate, hydrochloride, tartrate, hydroxynaphthoate, teoclate, iodide, tosylate, isothionate, triethiodide, trifluoro acetate (TFA salt), lactate, pantoate, valerate, and the like which can be used as a dosage form for modifying the solubility or hydrolysis characteristics or can be used in sustained release or pro-drug formulations. It will be understood that, as used herein, references to the co-agonist
- 30 peptides disclosed herein are meant to also include embodiments that comprise a co-agonist peptide or peptides and one or more of the pharmaceutically acceptable salts.

As used herein, the term "treating" includes prophylaxis of the specific disorder or condition, or alleviation of the symptoms associated with a specific disorder or condition and/or

preventing or eliminating said symptoms. For example, as used herein the term "treating diabetes" will refer in general to altering glucose blood levels in the direction of normal levels and may include increasing or decreasing blood glucose levels depending on a given situation.

As used herein an "effective" amount or a "therapeutically effective amount" means the
5 total amount of each active component of the pharmaceutical composition or method that is
sufficient to show a meaningful patient benefit, i.e., treatment, healing, prevention or
amelioration of the relevant medical condition, or an increase in rate of treatment, healing,
prevention or amelioration of such conditions. It refers to the amount of a co-agonist peptide or
peptides that is nontoxic but sufficient to provide the desired effect. For example one desired
10 effect would be the prevention or treatment of hyperglycemia, e.g., as measured by a change in
blood glucose level closer to normal, or treatment of obesity by inducing weight loss and/or
preventing weight gain, e.g., as measured by reduction in body weight, or preventing or reducing
an increase in body weight, or normalizing body fat distribution. The amount that is "effective"
will vary from subject to subject, depending on the age and general condition of the individual,
15 mode of administration, and the like. Thus, it is not always possible to specify an exact
"effective amount." However, an appropriate "effective" amount in any individual case may be
determined by one of ordinary skill in the art using routine experimentation. When applied to an
individual active ingredient, administered alone, the term refers to that ingredient alone. When
applied to a combination, the term refers to combined amounts of the active ingredients that
20 result in the therapeutic effect, whether administered in combination, serially, or simultaneously.

The term, "parenteral" means not through the alimentary canal but by some other route,
e.g., subcutaneous, intramuscular, intraspinal, or intravenous.

As used herein, the term "peptide" encompasses a chain of 3 or more amino acids and
typically less than 100 amino acids, wherein the amino acids are naturally occurring or coded or
25 non-naturally occurring or non-coded amino acids. Non-naturally occurring amino acids refer to
amino acids that do not naturally occur in vivo but which, nevertheless, can be incorporated into
the peptide structures described herein. "Non-coded" as used herein refers to an amino acid that
is not an L-isomer of any of the following 20 amino acids: Ala, Cys, Asp, Glu, Phe, Gly, His,
He, Lys, Leu, Met, Asn, Pro, Gln, Arg, Ser, Thr, Val, Trp, Tyr. "Coded" as used herein refers to
30 an amino acid that is an L-isomer of any of the following 20 amino acids: Ala, Cys, Asp, Glu,
Phe, Gly, His, He, Lys, Leu, Met, Asn, Pro, Gin, Arg, Ser, Thr, Val, Trp, Tyr. In some
embodiments, the peptides and variant peptides described herein are about the same length as
SEQ ID NO: 1 (which is 29 amino acids in length), e.g. 25-35 amino acids in length. Exemplary

lengths include 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, or 50 amino acids in length.

Typically, polypeptides and proteins have a polymer length that is greater than that of "peptides."

5 Similarly, a reference herein to "position 28" would mean the corresponding position 29 for a glucagon analog in which one amino acid has been added before the N-terminus of SEQ ID NO: 1. As used herein an "amino acid modification" refers to (i) a substitution or replacement of an amino acid of SEQ ID NO: 1 with a different amino acid (naturally- occurring or coded or non-coded or non-naturally-occurring amino acid), (ii) an addition of an amino acid (naturally-
10 occurring or coded or non-coded or non-naturally-occurring amino acid), to SEQ ID NO: 1 or (iii) a deletion of one or more amino acids of SEQ ID NO: 1.

Amino acid "modification" refers to an insertion, deletion or substitution of one amino acid with another. In some embodiments, the amino acid substitution or replacement is a conservative amino acid substitution, e.g., a conservative substitution of the amino acid at one or
15 more of positions 2, 5, 7, 10, 11, 12, 13, 14, 16, 17, 18, 19, 20, 21, 24, 27, 28 or 29. As used herein, the term "conservative amino acid substitution" is the replacement of one amino acid with another amino acid having similar properties, e.g., size, charge, hydrophobicity, hydrophilicity, and/or aromaticity, and includes exchanges within one of the following five groups:

I. Small aliphatic, nonpolar or slightly polar residues:

20 Ala, Ser, Thr, Pro, Gly;

II. Polar, negatively- charged residues and their amides and esters:

Asp, Asn, Glu, Gin, cysteic acid and homocysteic acid;

III. Polar, positively- charged residues:

His, Arg, Lys; Ornithine (Orn)

25 IV. Large, aliphatic, nonpolar residues:

Met, Leu, Ile, Val, Cys, Norleucine (Nle), homocysteine

V. Large, aromatic residues:

Phe, Tyr, Trp, acetyl phenylalanine

In some embodiments, the amino acid substitution is not a conservative amino acid
30 substitution, e.g., is a non-conservative amino acid substitution.

As used herein the term "charged amino acid" or "charged residue" refers to an amino acid that comprises a side chain that is negatively- charged (i.e., de-protonated) or positively- charged (i.e., protonated) in aqueous solution at physiological pH. For example negatively-

charged amino acids include aspartic acid, glutamic acid, cysteic acid, homocysteic acid, and homoglutamic acid, whereas positively-charged amino acids include arginine, lysine and histidine. Charged amino acids include the charged amino acids among the 20 coded amino acids, as well as atypical or non-naturally occurring or non-coded amino acids.

5 As used herein the term "acidic amino acid" refers to an amino acid that comprises a second acidic moiety (other than the carboxylic acid of the amino acid), including for example, a carboxylic acid or sulfonic acid group.

 As used herein, the term "acylated amino acid" refers to an amino acid comprising an acyl group which is non-native to a naturally-occurring amino acid, regardless of the means by which it is produced (e.g. acylation prior to incorporating the amino acid into a peptide, or
10 acylation after incorporation into a peptide).

 As used herein the term "alkylated amino acid" refers to an amino acid comprising an alkyl group which is non-native to a naturally-occurring amino acid, regardless of the means by which it is produced. Accordingly, the acylated amino acids and alkylated amino acids of the
15 present disclosures are non-coded amino acids.

 In particular aspects of the compounds disclosed herein the C-terminal protecting group may be an amide or ester. For example, the carboxylic acid of the C-terminal amino acid is replaced with a charge-neutral group, such as an amide or ester.

 As used herein, the term "selectivity" of a molecule for a first receptor relative to a
20 second receptor refers to the following ratio: EC_{50} of the molecule at the second receptor divided by the EC_{50} of the molecule at the first receptor. For example, a molecule that has an EC_{50} of 1 nM at a first receptor and an EC_{50} of 100 nM at a second receptor has 100-fold selectivity for the first receptor relative to the second receptor.

 As used herein the term "native glucagon" refers to a peptide consisting of the sequence
25 of SEQ ID NO: 1 and the term "native GLP-1" is a generic term that designates GLP-1(7-36) amide, GLP-1 (7-37) acid or a mixture of those two compounds.

 As used herein, "glucagon potency" or "potency compared to native glucagon" of a molecule refers to the inverse ratio of the EC_{50} of the molecule at the glucagon receptor divided by the EC_{50} of native glucagon at glucagon receptor.

30 As used herein, "GLP-1 potency" or "potency compared to native GLP-1" of a molecule refers to the inverse ratio of the EC_{50} of the molecule at GLP-1 receptor divided by the EC_{50} of native GLP-1 at GLP-1 receptor.

Pharmaceutical Compositions

Further provided are pharmaceutical compositions comprising a therapeutically effective amount of one or more of the co-agonist peptides disclosed herein for the treatment of a metabolic disorder in an individual. Such disorders include, but are not limited to, obesity, metabolic syndrome or syndrome X, type II diabetes, complications of diabetes such as retinopathy, hypertension, dyslipidemias, cardiovascular disease, gallstones, osteoarthritis, and certain forms of cancers. The obesity-related disorders herein are associated with, caused by, or result from obesity.

“Obesity” is a condition in which there is an excess of body fat. The operational definition of obesity is based on the Body Mass Index (BMI), calculated as body weight per height in meters squared (kg/m^2). “Obesity” refers to a condition whereby an otherwise healthy subject has a Body Mass Index (BMI) greater than or equal to 30 kg/m^2 , or a condition whereby a subject with at least one co-morbidity has a BMI greater than or equal to 27 kg/m^2 . An “obese subject” is an otherwise healthy subject with a Body Mass Index (BMI) greater than or equal to 30 kg/m^2 or a subject with at least one co-morbidity with a BMI greater than or equal to 27 kg/m^2 . A “subject at risk for obesity” is an otherwise healthy subject with a BMI of 25 kg/m^2 to less than 30 kg/m^2 or a subject with at least one co-morbidity with a BMI of 25 kg/m^2 to less than 27 kg/m^2 .

The increased risks associated with obesity occur at a lower Body Mass Index (BMI) in Asians. In Asian countries, including Japan, “obesity” refers to a condition whereby a subject with at least one obesity-induced or obesity-related co-morbidity that requires weight reduction or that would be improved by weight reduction, has a BMI greater than or equal to 25 kg/m^2 . In Asian countries, including Japan, an “obese subject” refers to a subject with at least one obesity-induced or obesity-related co-morbidity that requires weight reduction or that would be improved by weight reduction, with a BMI greater than or equal to 25 kg/m^2 . In Asian countries, a “subject at risk of obesity” is a subject with a BMI of greater than 23 kg/m^2 to less than 25 kg/m^2 .

As used herein, the term “obesity” is meant to encompass all of the above definitions of obesity.

Obesity-induced or obesity-related co-morbidities include, but are not limited to, diabetes, non-insulin dependent diabetes mellitus - type 2, impaired glucose tolerance, impaired

fasting glucose, insulin resistance syndrome, dyslipidemia, hypertension, hyperuricacidemia, gout, coronary artery disease, myocardial infarction, angina pectoris, sleep apnea syndrome, Pickwickian syndrome, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), fatty liver; cerebral infarction, cerebral thrombosis, transient ischemic attack, orthopedic disorders, arthritis deformans, lumbodynia, emmeniopathy, and infertility. In particular, co-morbidities include: hypertension, hyperlipidemia, dyslipidemia, glucose intolerance, cardiovascular disease, sleep apnea, diabetes mellitus, and other obesity-related conditions.

“Treatment” (of obesity and obesity-related disorders) refers to the administration of the compounds of the present invention to reduce or maintain the body weight of an obese subject. One outcome of treatment may be reducing the body weight of an obese subject relative to that subject’s body weight immediately before the administration of the compounds of the present invention. Another outcome of treatment may be preventing body weight regain of body weight previously lost as a result of diet, exercise, or pharmacotherapy. Another outcome of treatment may be decreasing the occurrence of and/or the severity of obesity-related diseases. The treatment may suitably result in a reduction in food or calorie intake by the subject, including a reduction in total food intake, or a reduction of intake of specific components of the diet such as carbohydrates or fats; and/or the inhibition of nutrient absorption; and/or the inhibition of the reduction of metabolic rate; and in weight reduction in patients in need thereof. The treatment may also result in an alteration of metabolic rate, such as an increase in metabolic rate, rather than or in addition to an inhibition of the reduction of metabolic rate; and/or in minimization of the metabolic resistance that normally results from weight loss.

“Prevention” (of obesity and obesity-related disorders) refers to the administration of the compounds of the present invention to reduce or maintain the body weight of a subject at risk of obesity. One outcome of prevention may be reducing the body weight of a subject at risk of obesity relative to that subject’s body weight immediately before the administration of the compounds of the present invention. Another outcome of prevention may be preventing body weight regain of body weight previously lost as a result of diet, exercise, or pharmacotherapy. Another outcome of prevention may be preventing obesity from occurring if the treatment is administered prior to the onset of obesity in a subject at risk of obesity. Another outcome of prevention may be decreasing the occurrence and/or severity of obesity-related disorders if the treatment is administered prior to the onset of obesity in a subject at risk of obesity. Moreover, if treatment is commenced in already obese subjects, such treatment may prevent the occurrence,

progression or severity of obesity-related disorders, such as, but not limited to, arteriosclerosis, Type II diabetes, polycystic ovarian disease, cardiovascular diseases, osteoarthritis, dermatological disorders, hypertension, insulin resistance, hypercholesterolemia, hypertriglyceridemia, and cholelithiasis.

5 The obesity-related disorders herein are associated with, caused by, or result from obesity. Examples of obesity-related disorders include overeating and bulimia, hypertension, diabetes, elevated plasma insulin concentrations and insulin resistance, dyslipidemias, hyperlipidemia, endometrial, breast, prostate and colon cancer, osteoarthritis, obstructive sleep
10 apnea, cholelithiasis, gallstones, heart disease, abnormal heart rhythms and arrhythmias, myocardial infarction, congestive heart failure, coronary heart disease, sudden death, stroke, polycystic ovarian disease, craniopharyngioma, the Prader-Willi Syndrome, Frohlich's syndrome, GH-deficient subjects, normal variant short stature, Turner's syndrome, and other pathological conditions showing reduced metabolic activity or a decrease in resting energy
15 expenditure as a percentage of total fat-free mass, e.g., children with acute lymphoblastic leukemia. Further examples of obesity-related disorders are metabolic syndrome, also known as syndrome X, insulin resistance syndrome, sexual and reproductive dysfunction, such as infertility, hypogonadism in males and hirsutism in females, gastrointestinal motility disorders, such as obesity-related gastro-esophageal reflux, respiratory disorders, such as obesity-
20 hypoventilation syndrome (Pickwickian syndrome), cardiovascular disorders, inflammation, such as systemic inflammation of the vasculature, arteriosclerosis, hypercholesterolemia, hyperuricaemia, lower back pain, gallbladder disease, gout, and kidney cancer. The compounds of the present invention are also useful for reducing the risk of secondary outcomes of obesity, such as reducing the risk of left ventricular hypertrophy.

 The term "diabetes," as used herein, includes both insulin-dependent diabetes mellitus
25 (IDDM, also known as type I diabetes) and non-insulin-dependent diabetes mellitus (NIDDM, also known as Type II diabetes). Type I diabetes, or insulin-dependent diabetes, is the result of an absolute deficiency of insulin, the hormone which regulates glucose utilization. Type II diabetes, or insulin-independent diabetes (i.e., non-insulin-dependent diabetes mellitus), often occurs in the face of normal, or even elevated levels of insulin and appears to be the result of the
30 inability of tissues to respond appropriately to insulin. Most of the Type II diabetics are also obese. The compounds of the present invention are useful for treating both Type I and Type II diabetes. The compounds are especially effective for treating Type II diabetes. The compounds

of the present invention are also useful for treating and/or preventing gestational diabetes mellitus.

The co-agonist peptides disclosed herein are insulinotropic and can be administered to patients with a disturbed glucose metabolism such as insulin resistance but no overt diabetes, as well as patients who for any reason cannot receive nutrition through the alimentary canal. Such patients include surgery patients, comatose patients, patients in shock, patients with gastrointestinal disease, patients with digestive hormone disease, and the like. In particular, obese patients, atherosclerotic patients, vascular disease patients, patients with gestational diabetes, patients with liver disease such as liver cirrhosis, patients with acromegaly, patients with glucocorticoid excess such as cortisol treatment or Cushing's disease, patients with activated counterregulatory hormones such as would occur after trauma, accidents and surgery and the like, patients with hypertriglyceridemia and patients with chronic pancreatitis can be readily and suitably nourished according to the invention without subjecting the patient to hypo- or hyperglycemia. In particular, the administration to such a patient aims to provide a therapy to as rapidly as possible deliver the nutritional and caloric requirements to the patient while maintaining his plasma glucose below the so-called renal threshold of about 160 to 180 milligrams per deciliter of glucose in the blood. Although normal patients not having glucose levels just below the renal threshold can also be treated according to the invention as described above, patients with disturbed glucose metabolism such as hyperglycemic patients whose plasma glucose level is just above the renal threshold also find the therapy suitable for their condition. In particular, such patients who have a degree of hyperglycemia below the renal threshold at intermittent intervals can receive a combination treatment of nutrients plus insulinotropic peptides according to any of the following regimens. Normal patients not suffering from such hyperglycemia can also be treated using the peptide analogs disclosed herein.

The co-agonist peptides disclosed herein may be used in a pharmaceutical composition when combined with a pharmaceutically acceptable carrier. Such compositions comprise a therapeutically-effective amount of one or more of the co-agonist peptides disclosed herein and a pharmaceutically acceptable carrier. Such a composition may also be comprised of (in addition to the co-agonist peptides disclosed herein and a carrier) diluents, fillers, salts, buffers, stabilizers, solubilizers, and other materials well known in the art. Compositions comprising the co-agonist peptides disclosed herein can be administered, if desired, in the form of salts provided the salts are pharmaceutically acceptable. Salts may be prepared using standard procedures known to those skilled in the art of synthetic organic chemistry. The co-agonist peptides

disclosed herein may be in multimers (for example, heterodimers or homodimers) or complexes with itself or other peptides. As a result, pharmaceutical compositions of the invention may comprise one or more co-agonist peptides disclosed herein in such multimeric or complexed form.

5 The pharmacological composition can comprise one or more co-agonist peptides disclosed herein; one or more co-agonist peptides disclosed herein and one or more other agents for treating a metabolic disorder; or the pharmacological composition comprising the one or more co-agonist peptides disclosed herein can be used concurrently with a pharmacological composition comprising an agent for treating a metabolic disorder. Such disorders include, but
10 are not limited to, obesity, metabolic syndrome or syndrome X, type II diabetes, complications of diabetes, hypertension, dyslipidemias, cardiovascular disease, gallstones, osteoarthritis, and certain forms of cancers.

 When the pharmacological composition comprises another agent for treating a metabolic disorder or the treatment includes a second pharmacological composition comprising an agent
15 for treating a metabolic disorder, the agent includes, but are not limited to, cannabinoid (CB1) receptor antagonists, glucagon like peptide 1 (GLP-1) receptor agonists, glucagon receptor antagonists, lipase inhibitors, leptin, tetrahydrolipstatin, 2-4-dinitrophenol, acarbose, sibutramine, phentamine, fat absorption blockers, simvastatin, mevastatin, ezetimibe, atorvastatin, sitagliptin, metformin, orlistat, Qnexa, topiramate, naltrexone, bupropion,
20 phentermine, losartan, losartan with hydrochlorothiazide, and the like.

 Examples of other active ingredients that may be administered separately or in the same pharmaceutical composition in combination with a co-agonist peptide as described herein include, but are not limited to:

- (1) dipeptidyl peptidase-IV (DPP-4) inhibitors (e.g., sitagliptin, alogliptin,
25 linagliptin, vildagliptin, saxagliptin and omarigliptin);
- (2) insulin sensitizers, including (i) PPAR γ agonists, such as the glitazones (e.g. pioglitazone, AMG 131, MBX2044, mitoglitazone, lobeglitazone, IDR-105, rosiglitazone, and balaglitazone), and other PPAR ligands, including (1) PPAR α/γ dual agonists (e.g., ZYH2, ZYH1, GFT505, chiglitazar, muraglitazar, aleglitazar, sodelglitazar, and naveglitazar); (2)
30 PPAR α agonists such as fenofibric acid derivatives (e.g., gemfibrozil, clofibrate, ciprofibrate, fenofibrate, bezafibrate), (3) selective PPAR γ modulators (SPPAR γ M's), (e.g., such as those disclosed in WO 02/060388, WO 02/08188, WO 2004/019869, WO 2004/020409, WO 2004/020408, and WO 2004/066963); and (4) PPAR γ partial agonists; (ii) biguanides, such as

metformin and its pharmaceutically acceptable salts, in particular, metformin hydrochloride, and extended-release formulations thereof, such as Glumetza™, Fortamet™, and GlucophageXR™; and (iii) protein tyrosine phosphatase-1B (PTP-1B) inhibitors (e.g., ISIS-113715 and TTP814);

- 5 (3) insulin or insulin analogs (e.g., insulin detemir, insulin glulisine, insulin degludec, insulin glargine, insulin lispro and inhalable formulations of each);
- (4) leptin and leptin derivatives and agonists;
- (5) amylin and amylin analogs (e.g., pramlintide);
- (6) sulfonylurea and non-sulfonylurea insulin secretagogues (e.g., tolbutamide,
- 10 glyburide, glipizide, glimepiride, mitiglinide, meglitinides, nateglinide and repaglinide);
- (7) α -glucosidase inhibitors (e.g., acarbose, voglibose and miglitol);
- (8) glucagon receptor antagonists (e.g., such as those disclosed in WO 98/04528, WO 99/01423, WO 00/39088, and WO 00/69810);
- (9) incretin mimetics, such as GLP-1, GLP-1 analogs, derivatives, and mimetics;
- 15 and GLP-1 receptor agonists (e.g., dulaglutide, semaglutide, albiglutide, exenatide, liraglutide, lixisenatide, taspoglutide, CJC-1131, and BIM-51077, including intranasal, transdermal, and once-weekly formulations thereof);
- (10) LDL cholesterol lowering agents such as (i) HMG-CoA reductase inhibitors (e.g., simvastatin, lovastatin, pravastatin, crivastatin, fluvastatin, atorvastatin, pitavastatin and
- 20 rosuvastatin), (ii) bile acid sequestering agents (e.g., colestilan, colestimide, colesevalam hydrochloride, colestipol, cholestyramine, and dialkylaminoalkyl derivatives of a cross-linked dextran), (iii) inhibitors of cholesterol absorption, (e.g., ezetimibe), and (iv) acyl CoA:cholesterol acyltransferase inhibitors, (e.g., avasimibe);
- (11) HDL-raising drugs;
- 25 (12) antiobesity compounds;
- (13) agents intended for use in inflammatory conditions, such as aspirin, non-steroidal anti-inflammatory drugs or NSAIDs, glucocorticoids, and selective cyclooxygenase-2 or COX-2 inhibitors;
- (14) antihypertensive agents, such as ACE inhibitors (e.g., lisinopril, enalapril,
- 30 ramipril, captopril, quinapril, and tandolapril), A-II receptor blockers (e.g., losartan, candesartan, irbesartan, olmesartan medoxomil, valsartan, telmisartan, and eprosartan), renin inhibitors (e.g., aliskiren), beta blockers, and calcium channel blockers;
- (15) glucokinase activators (GKAs) (e.g., AZD6370);

- (16) inhibitors of 11β -hydroxysteroid dehydrogenase type 1, (e.g., such as those disclosed in U.S. Patent No. 6,730,690, and LY-2523199);
- (17) CETP inhibitors (e.g., anacetrapib, and torcetrapib);
- (18) inhibitors of fructose 1,6-bisphosphatase, (e.g., such as those disclosed in
 5 U.S. Patent Nos. 6,054,587; 6,110,903; 6,284,748; 6,399,782; and 6,489,476);
- (19) inhibitors of acetyl CoA carboxylase-1 or 2 (ACC1 or ACC2);
- (20) AMP-activated Protein Kinase (AMPK) activators;
- (21) other agonists of the G-protein-coupled receptors: (i) GPR-109, (ii) GPR-119 (e.g., MBX2982 and PSN821), and (iii) GPR-40 (e.g., TAK875, 5-[4-[[[(1R)-4-[6-(3-hydroxy-3-methylbutoxy)-2-methylpyridine-3-yl]-2,3-dihydro-1H-indene-1-yl]oxy]phenyl]isothiazole-3-ol
 10 1-oxide, 5-(4-((3-(2,6-dimethyl-4-(3-(methylsulfonyl)propoxy)phenyl)phenyl)methoxy)phenyl)iso, 5-(4-((3-(2-methyl-6-(3-hydroxypropoxy)pyridine-3-yl)-2-methylphenyl)methoxy)phenyl)isothiazole-3-ol 1-oxide, and 5-[4-[[[3-[4-(3-aminopropoxy)-2,6-dimethylphenyl]phenyl]methoxy]phenyl]isothiazole-3-ol 1-
 15 oxide);
- (22) SSTR3 antagonists (e.g., such as those disclosed in WO 2009/001836);
- (23) neuromedin U receptor agonists (e.g., such as those disclosed in WO 2009/042053, including, but not limited to, neuromedin S (NMS));
- (24) SCD inhibitors;
- (25) GPR-105 antagonists (e.g., such as those disclosed in WO 2009/000087);
- (26) SGLT inhibitors (e.g., ASP1941, SGLT-3, empagliflozin, dapagliflozin, canagliflozin, BI-10773, PF-04971729, remogliflozin, TS-071, tofogliflozin, ertugliflozin, ipragliflozin, and LX-4211);
- (27) inhibitors of acyl coenzyme A:diacylglycerol acyltransferase 1 and 2
 25 (DGAT-1 and DGAT-2);
- (28) inhibitors of fatty acid synthase;
- (29) inhibitors of acyl coenzyme A:monoacylglycerol acyltransferase 1 and 2 (MGAT-1 and MGAT-2);
- (30) agonists of the TGR5 receptor (also known as GPBAR1, BG37, GPCR19,
 30 GPR131, and M-BAR);
- (31) ileal bile acid transporter inhibitors;
- (32) PACAP, PACAP mimetics, and PACAP receptor 3 agonists;
- (33) PPAR agonists;

- (34) protein tyrosine phosphatase-1B (PTP-1B) inhibitors;
- (35) IL-1b antibodies, (e.g., XOMA052 and canakinumab); and
- (36) bromocriptine mesylate and rapid-release formulations thereof.

Of particular interest are metformin hydrochloride, pioglitazone, rosiglitazone,
5 simvastatin, atorvastatin, or a sulfonylurea.

Antiobesity compounds that can be combined with compounds as disclosed herein include topiramate; zonisamide; naltrexone; phentermine; bupropion; the combination of bupropion and naltrexone; the combination of bupropion and zonisamide; the combination of topiramate and phentermine; fenfluramine; dexfenfluramine; sibutramine; lipase inhibitors, such as orlistat and
10 cetilistat; melanocortin receptor agonists, in particular, melanocortin-4 receptor agonists; CCK-1 agonists; melanin-concentrating hormone (MCH) receptor antagonists; neuropeptide Y₁ or Y₅ antagonists (such as MK-0557); CB1 receptor inverse agonists and antagonists (such as rimonabant and taranabant); β_3 adrenergic receptor agonists; ghrelin antagonists; bombesin receptor agonists (such as bombesin receptor subtype-3 agonists); and 5-hydroxytryptamine-2c
15 (5-HT_{2c}) agonists, such as lorcaserin. For a review of anti-obesity compounds that can be combined with compounds of the present invention, see Chaki et al., "Recent advances in feeding suppressing agents: potential therapeutic strategy for the treatment of obesity," Expert Opin. Ther. Patents, 11: 1677-1692 (2001); Spanswick and Lee, "Emerging antiobesity drugs," Expert Opin. Emerging Drugs, 8: 217-237 (2003); Fernandez-Lopez, et al., "Pharmacological
20 Approaches for the Treatment of Obesity," Drugs, 62: 915-944 (2002); and Gadde, et al., "Combination pharmaceutical therapies for obesity," Exp. Opin. Pharmacother., 10: 921-925 (2009).

In another aspect of the invention, a pharmaceutical composition is disclosed which comprises one or more of the following agents:

25 (a) a compound as disclosed herein, e.g. a one or co-agonists as disclosed herein wherein each co-agonist may independently be a peptide comprising the amino acid sequence of SEQ ID NO:29;

(b) one or more compounds selected from the group consisting of:

- (1) dipeptidyl peptidase-IV (DPP-4) inhibitors;
- 30 (2) insulin sensitizers, including (i) PPAR γ agonists, such as the glitazones (e.g. AMG 131, MBX2044, mitoglitazone, lobeglitazone, IDR-105, pioglitazone, rosiglitazone, and balaglitazone) and other PPAR ligands, including (1) PPAR α/γ dual agonists, such as ZYH1, YYH2, chiglitazar, GFT505, muraglitazar, aleglitazar, sodelglitazar, and naveglitazar, (2)

- PPAR α agonists, such as fenofibric acid derivatives (e.g., gemfibrozil, clofibrate, ciprofibrate, fenofibrate and bezafibrate), (3) selective PPAR γ modulators (SPPAR γ M's), and (4) PPAR γ partial agonists; (ii) biguanides, such as metformin and its pharmaceutically acceptable salts, in particular, metformin hydrochloride, and extended-release formulations thereof, such as
- 5 Glumetza®, Fortamet®, and GlucophageXR®; (iii) protein tyrosine phosphatase-1B (PTP-1B) inhibitors, such as ISI-113715, and TTP814;
- (3) sulfonylurea and non-sulfonylurea insulin secretagogues, (e.g., tolbutamide, glyburide, glipizide, glimepiride, mitiglinide, and meglitinides, such as nateglinide and repaglinide);
- 10 (4) α -glucosidase inhibitors (e.g., acarbose, voglibose and miglitol);
- (5) glucagon receptor antagonists;
- (6) LDL cholesterol lowering agents such as (i) HMG-CoA reductase inhibitors (e.g., lovastatin, simvastatin, pravastatin, cerivastatin, fluvastatin, atorvastatin, pitavastatin, and rosuvastatin), (ii) bile acid sequestering agents (e.g., colestilan, cholestyramine, colestimide,
- 15 colesevelam hydrochloride, colestipol, and dialkylaminoalkyl derivatives of a cross-linked dextran), (iii) inhibitors of cholesterol absorption, (e.g., ezetimibe), and (iv) acyl CoA:cholesterol acyltransferase inhibitors (e.g., avasimibe);
- (7) HDL-raising drugs; and nicotinic acid receptor agonists;
- (8) antiobesity compounds;
- 20 (9) agents intended for use in inflammatory conditions, such as aspirin, non-steroidal anti-inflammatory drugs (NSAIDs), glucocorticoids, and selective cyclooxygenase-2 (COX-2) inhibitors;
- (10) antihypertensive agents, such as ACE inhibitors (e.g., enalapril, lisinopril, ramipril, captopril, quinapril, and tandolapril), A-II receptor blockers (e.g., losartan, candesartan,
- 25 irbesartan, olmesartan medoxomil, valsartan, telmisartan, and eprosartan), renin inhibitors (e.g., aliskiren), beta blockers (e.g., calcium channel blockers);
- (11) glucokinase activators (GKAs) (e.g., AZD6370);
- (12) inhibitors of 11 β -hydroxysteroid dehydrogenase type 1 (e.g., such as those disclosed in U.S. Patent No. 6,730,690; WO 03/104207; and WO 04/058741);
- 30 (13) inhibitors of cholesteryl ester transfer protein (CETP), (e.g., torcetrapib and MK-0859);
- (14) inhibitors of fructose 1,6-bisphosphatase (e.g., such as those disclosed in U.S. Patent Nos. 6,054,587; 6,110,903; 6,284,748; 6,399,782; and 6,489,476);

- (15) inhibitors of acetyl CoA carboxylase-1 or 2 (ACC1 or ACC2);
- (16) AMP-activated Protein Kinase (AMPK) activators;
- (17) agonists of the G-protein-coupled receptors: (i) GPR-109, (ii) GPR-119 (e.g., MBX2982, and PSN821), and (iii) GPR-40 (e.g., TAK875, 5-[4-[(1R)-4-[6-(3-hydroxy-3-methylbutoxy)-2-methylpyridine-3-yl]-2,3-dihydro-1H-indene-1-yl]oxy]phenyl]isothiazole-3-ol 1-oxide, 5-(4-((3-(2,6-dimethyl-4-(3-(methylsulfonyl)propoxy)phenyl)phenyl)methoxy)-phenyl)iso, 5-(4-((3-(2-methyl-6-(3-hydroxypropoxy)pyridine-3-yl)-2-methylphenyl)methoxy)-phenyl)isothiazole-3-ol 1-oxide, and 5-[4-[[3-[4-(3-aminopropoxy)-2,6-dimethylphenyl]phenyl]-methoxy]phenyl]isothiazole-3-ol 1-oxide);
- (18) SSTR3 antagonists (e.g., such as those disclosed in WO 2009/011836);
- (19) neuromedin U receptor agonists (e.g., such as those disclosed in WO2009/042053, including, but not limited to, neuromedin S (NMS));
- (20) inhibitors of stearoyl-coenzyme A delta-9 desaturase (SCD);
- (21) GPR-105 antagonists (e.g., such as those disclosed in WO 2009/000087);
- (22) inhibitors of glucose uptake, such as sodium-glucose transporter (SGLT) inhibitors and its various isoforms, such as SGLT-1; SGLT-2 (e.g., ASP1941, TS071, BI10773, tofogliflozin, LX4211, canagliflozin, ertugliflozin, ipragliflozin, dapagliflozin and remogliflozin, and SGLT-3);
- (23) inhibitors of acyl coenzyme A:diacylglycerol acyltransferase 1 and 2 (DGAT-1 and DGAT-2);
- (24) inhibitors of fatty acid synthase;
- (25) inhibitors of acyl coenzyme A:monoacylglycerol acyltransferase 1 and 2 (MGAT-1 and MGAT-2);
- (26) agonists of the TGR5 receptor (also known as GPBAR1, BG37, GPCR19, GPR131, and M-BAR);
- (28) bromocriptine mesylate and rapid-release formulations thereof, and
- (29) IL-1b antibodies (e.g., XOMA052, and canakinumab); and
- (c) a pharmaceutically acceptable carrier.

When a co-agonist peptide of the present invention is used contemporaneously with one or more other drugs, peptides, or proteins, a pharmaceutical composition containing such other drugs, peptides, or proteins in addition to the co-agonist peptide of the present invention may be provided. Accordingly, the pharmaceutical compositions of the present invention include those

that also contain one or more other active ingredients, in addition to a co-agonist peptide of the present invention.

Methods of administering the pharmacological compositions comprising the one or more co-agonist peptides disclosed herein to an individual include, but are not limited to, intradermal, intramuscular, intraperitoneal, intravenous, subcutaneous, intranasal, epidural, and oral routes. The compositions can be administered by any convenient route, for example by infusion or bolus injection, by absorption through epithelial or mucocutaneous linings (for example, oral mucosa, rectal and intestinal mucosa, and the like), ocular, and the like and can be administered together with other biologically-active agents. Administration can be systemic or local. In addition, it may be advantageous to administer the composition into the central nervous system by any suitable route, including intraventricular and intrathecal injection. Intraventricular injection may be facilitated by an intraventricular catheter attached to a reservoir (for example, an Ommaya reservoir). Pulmonary administration may also be employed by use of an inhaler or nebulizer, and formulation with an aerosolizing agent. It may also be desirable to administer the one or more co-agonist peptides disclosed herein locally to the area in need of treatment; this may be achieved by, for example, and not by way of limitation, local infusion during surgery, topical application, by injection, by means of a catheter, by means of a suppository, or by means of an implant.

Various delivery systems are known and can be used to administer the co-agonist peptides disclosed herein including, but not limited to, encapsulation in liposomes, microparticles, microcapsules; minicells; polymers; capsules; tablets; and the like. In one embodiment, the co-agonist peptides disclosed herein may be delivered in a vesicle, in particular a liposome. In a liposome, the co-agonist peptides disclosed herein are combined, in addition to other pharmaceutically acceptable carriers, with amphipathic agents such as lipids which exist in aggregated form as micelles, insoluble monolayers, liquid crystals, or lamellar layers in aqueous solution. Suitable lipids for liposomal formulation include, without limitation, monoglycerides, diglycerides, sulfatides, lysolecithin, phospholipids, saponin, bile acids, and the like. Preparation of such liposomal formulations is within the level of skill in the art, as disclosed, for example, in U.S. Patent No. 4,837,028 and U.S. Patent No. 4,737,323. In yet another embodiment, the co-agonist peptides disclosed herein can be delivered in a controlled release system including, but not limited to: a delivery pump (*See*, for example, Saudek, *et al.*, New Engl. J. Med. 321: 574 (1989) and a semi-permeable polymeric material (*See*, for example, Howard, *et al.*, J. Neurosurg. 71: 105 (1989)). Additionally, the controlled release system can be placed in proximity of the

therapeutic target, thus requiring only a fraction of the systemic dose. *See*, for example, Goodson, In: *Medical Applications of Controlled Release*, 1984. (CRC Press, Boca Raton, Fla.).

The amount of the compositions comprising one or more of the co-agonist peptides disclosed herein which will be effective in the treatment of a particular disorder or condition will
5 depend on the nature of the disorder or condition, and may be determined by standard clinical techniques by those of average skill within the art. In addition, *in vitro* assays may optionally be employed to help identify optimal dosage ranges. The precise dose to be employed in the formulation will also depend on the route of administration, and the overall seriousness of the disease or disorder, and should be decided according to the judgment of the practitioner and each
10 patient's circumstances. Ultimately, the attending physician will decide the amount of the composition with which to treat each individual patient. Initially, the attending physician will administer low doses of the composition and observe the patient's response. Larger doses of the composition may be administered until the optimal therapeutic effect is obtained for the patient, and at that point the dosage is not increased further.

In general, the daily dose range lie within the range of from about 0.001 mg to about 100 mg per kg body weight of a mammal, preferably 0.01 mg to about 50 mg per kg, and most preferably 0.1 to 10 mg per kg, in single or divided doses. On the other hand, it may be necessary to use dosages outside these limits in some cases. However, suitable dosage ranges for intravenous administration of the compositions comprising the one or more co-agonist peptides
20 disclosed herein are generally about 5-500 micrograms (μ g) of active compound per kilogram (Kg) body weight. Suitable dosage ranges for intranasal administration are generally about 0.01 pg/kg body weight to 1 mg/kg body weight.

Effective doses may be extrapolated from dose-response curves derived from *in vitro* or animal model test systems. Suppositories generally contain active ingredient in the range of
25 0.5% to 10% by weight; oral formulations preferably contain 10% to 95% active ingredient. Ultimately the attending physician will decide on the appropriate duration of therapy using compositions comprising the one or more co-agonist peptides disclosed herein of the present invention. Dosage will also vary according to the age, weight and response of the individual patient.

Further provided is a pharmaceutical pack or kit, comprising one or more containers
30 filled with one or more of the ingredients of the pharmaceutical compositions and co-agonist peptides disclosed herein. Optionally associated with such container(s) may be a notice in the form prescribed by a governmental agency regulating the manufacture, use or sale of

pharmaceuticals or biological products, which notice reflects approval by the agency of manufacture, use or sale for human administration.

The present invention further provides for the use of any one of the aforementioned peptides for manufacture of a medicament for the treatment of obesity metabolic disease.

5 The present invention further provides for the use of any one of the aforementioned compositions for manufacture of a medicament for the treatment of obesity metabolic disease.

In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity.

10 In particular aspects, the diabetes is Type I diabetes, Type II diabetes, or gestational diabetes.

In particular aspects, the medicament is for treatment of more than one metabolic disease, for example, diabetes and NASH, NAFLD, or obesity; obesity and NASH or NAFLD; diabetes, NASH, and obesity; diabetes, NAFLD, and obesity; or diabetes and obesity.

15 Further provided is method for treating a metabolic disease in a patient or individual comprising: administering to the patient or individual an effective amount of any one of the aforementioned compositions comprising a co-agonist peptide and administering to the patient or individual an effective amount of a composition comprising an insulin or insulin analog to treat the metabolic disease in the patient or individual.

20 In particular aspects, the composition comprising the co-agonist peptide is administered at a time prior to the time the composition comprising the insulin or insulin analog is administered. In another aspect, the composition comprising the insulin or insulin analog is administered at a time prior to the time the composition comprising the co-agonist peptide is administered. In a further still aspect, the composition comprising the co-agonist peptide is administered at the same time as the composition comprising the insulin or insulin analog is administered.

25 In particular aspects, the insulin analog is insulin detemir, insulin glargine, insulin levemir, insulin glulisine, or insulin lispro.

In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity.

30 In particular aspects, the diabetes is Type I diabetes, Type II diabetes, or gestational diabetes.

In particular aspects, the patient has more than one metabolic disease, for example, diabetes and NASH, NAFLD, or obesity; obesity and NASH or NAFLD; diabetes, NASH, and obesity; diabetes, NAFLD, and obesity; or diabetes and obesity.

The present invention further provides a composition comprising any one of the
5 aforementioned peptides; an insulin or insulin analog; and, a pharmaceutically acceptable carrier.

The present invention further provides for the use of a composition comprising any one of the aforementioned peptides; an insulin or insulin analog; and, a pharmaceutically acceptable carrier for the treatment of a metabolic disease.

In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease
10 (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity. In further aspects, the diabetes is Type I diabetes, Type II diabetes, or gestational diabetes.

The present invention further provides for the use of a composition comprising any one of the aforementioned peptides; an insulin or insulin analog; and, a pharmaceutically acceptable carrier for the manufacture of a medicament for the treatment of a metabolic disease.

In particular aspects, the metabolic disease is diabetes, non-alcoholic fatty liver disease
15 (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity. In further aspects, the diabetes is Type I diabetes, Type II diabetes, or gestational diabetes.

List of Abbreviations Aq or aq. is aqueous; Boc is *tert*-butoxycarbonyl; CH₂Cl₂ is dichloromethane; DCM is dichloromethane; Dde is 1-(4,4-dimethyl-2,6-dioxocyclohex-1-ylidene)ethyl; DIC is N,N'-diisopropylcarbodiimide; DIEA is diisopropylethylamine; DMF is N,N-dimethylformamide; DMSO is dimethylsulfoxide; Fmoc is Fluorenylmethyloxycarbonyl; Fmoc-Cl is Fluorenylmethyloxycarbonyl chloride; g is gram(s); h or hr or hrs is hour(s); Grubbs Catalyst[®] 2nd Generation is benzylidene[1,3-bis(2,4,6-trimethylphenyl)-2-imidazolidinylidene]dichloro(tricyclohexylphosphine)ruthenium; HATU is O-(7-azabenzotriazol-1-yl)-N,N,N',N'-tetramethyluronium hexafluorophosphate; HOAt is hydroxybenzotriazole; HOBt is hydroxybenzotriazole; L is liter; LC-MS is liquid chromatography-mass spectroscopy; mL is milliliter; min or mins is minute(s); Mol is mole(s); mmol is mmole(s); mg is milligram(s); MS is mass spectroscopy; N is normal; NMP is 1-methyl-2-pyrrolidinone; PG is protecting group; rt or r.t. or RT is room temperature; *t*-BuO is *tert*-butoxy; *t*-Bu is *tert*-butyl; *t*-BuOH is *tert*-butyl alcohol; TFA is trifluoroacetic acid; and UPLC
20 is ultra performance liquid chromatography.
25
30

Methods of Synthesis of the Compounds of the Present Invention:

The following reaction schemes and Examples illustrate methods which may be employed for the synthesis of the peptides of the present invention, using appropriate materials. These reaction schemes and Examples are provided for the purpose of illustration only and are not to be construed as limitations on the disclosed invention. Those skilled in the art will readily understand that known variations of protecting groups, as well as of the conditions and processes of the following preparative procedures, can be used to prepare these peptides. Starting materials are either commercially available or made by known procedures in the literature or as illustrated. All temperatures are degrees Celsius unless otherwise noted.

EXAMPLE 1

GENERAL SYNTHETIC PROCEDURE FOR PEPTIDES OF SEQ ID Nos. 6-28 (Table 1)

The peptides in Table 1 were synthesized by solid phase using Fmoc/tBu strategy on a Rink-amide PEG-PS resin, Champion (Biosearch Technologies (150 μ mol, loading 0.28 mmol/g) on a Symphony Protein Technologies Inc synthesizer.

All of the amino acids were dissolved at a 0.3 M concentration in a solution of 0.3M HOBt (Hydroxybenzotriazole) in DMF. The amino acids were activated with equimolar amounts of HATU (O-(7-azabenzotriazol-1-yl)-N,N,N',N'-tetramethyluronium hexafluorophosphate) and a 2-fold molar excess of DIEA (diisopropylethylamine) solution 2M in NMP. The acylation reactions were performed for 1 hour with 5-fold excess of activated amino acid over the resin free amino groups.

Double acylation reactions of 45 minutes were performed from His¹ to Thr⁷, and for amino acids at positions 15, 16, 22, 23. The N-terminal residue was incorporated as Boc-His(Trt)-OH. For SEQ ID NO.: 6, 7, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, the Lysine at position 10 was protected by the orthogonal Dde [1-(4,4-dimethyl-2,6-dioxocyclohex-1-ylidene)ethyl] protecting group. The Dde protecting group of Lys¹⁰ was removed by treatment with a solution of 2% hydrazine in DMF and side chain derivatization was accomplished by manual coupling of Fmoc-Glu-OtBu residues and palmitic acid activated with DIC and HOAt.

All of the amino acids required for triazole formation such as Fmoc-D-propargyl glycine and Fmoc-6-Azido-L-norleucine and Fmoc-O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine were incorporated by manual coupling, activated with HOAt (Hydroxybenzoazatriazole) and DIC (N,N'-diisopropylcarbodiimide).

The dry peptide-resins were treated for 2 hours at room temperature with 88% TFA, 5% phenol, 2% triisopropylsilane and 5% water to afford protecting groups deprotection and cleavage from resin. The solution was filtered to remove the resin and the crude peptide solution was precipitated in cold methyl *tert*-butyl ether. The peptide pellet was resuspended, washed and
 5 centrifuged in cold methyl *tert*-butyl ether for 2 times. The peptide pellet was dried under vacuum and then resuspended in H₂O, 20% acetonitrile, and lyophilized.

The crude peptides with Sequence ID Nos: 6-28 (100 mg in 2 ml of DMSO) were purified by reverse-phase HPLC using preparative Waters Deltapak C4 column (40 x 200 mm, 15 μ m, 300Å) and using as eluents (A) 0.1% TFA in water and (B) 0.1% TFA in acetonitrile in
 10 order to obtain pure linear peptides.

For sequences ID No: 6-27, the formation of the triazole cycle between side chains of D-propargyl-Gly and the 6-azido-L-Norleucine was performed by incubating the purified non cyclic precursors in H₂O/*t*-BuOH 2:1 (1mg/ml) with CuSO₄ and sodium ascorbate at room temperature for 5 minutes. After removal of *t*-BuOH and acidification with TFA, the reaction
 15 mixture was purified by reverse-phase preparative on Reprosil Gold C18 column (20 x 150 mm, 5 μ m, 100Å) using as eluents (A) 0.1% TFA in water and (B) 0.1% TFA in acetonitrile.

All the final peptides were characterized on an Acquity UPLC Waters Chromatograph, with BEH300 C4 Acquity Waters 2.1 x 100 mm, 1.7 μ m, at 45°C, using H₂O, 0.1% TFA (A) and CH₃CN, 0.1% TFA (B) as solvents and by electrospray mass spectrometry on a Acquity SQ
 20 Detector.

EXAMPLE 2

SYNTHETIC PROTOCOL OF PEPTIDE SEQ ID NO. 19 (TP843)

Sequence:

HUQGTFTSDK(γ E γ EC16)SKYLDURAAQDFVpra*WLNleNle(ϵ N₃)*T-NH₂

25 Legend: U = aminoisobutyric acid; γ Glu = γ -glutamic acid; Nle = Norleucine; C16 =CO-(CII2)15; Nle(ϵ N₃)*-pra* = 1,4 disubstituted triazole bridge.

The peptide of SEQ ID No. 19 was synthesized by solid phase synthesis using Fmoc/*t*-Bu chemistry on a peptide multisynthesizer Symphony (Protein Technologies Inc.) on a 180 μ mol scale, using a Rink-amide PS resin (Novabiochem, loading 0.35 mmol/g).

30 All the amino acids were dissolved at a 0.3 M concentration in DMF. The amino acids were activated with equimolar amounts of HATU (O-(7-azabenzotriazol-1-yl)-N,N,N',N'-tetramethyluronium hexafluorophosphate) solution 0.3 M in DMF, and a 2-fold molar excess of DIEA (N,N-diisopropylethylamine), solution 2M in NMP. The acylation reactions were

performed in general for 1 hour with a 5-fold excess of activated amino acid over the resin free amino groups with double 45 minutes acylation reactions performed from His1 to Thr7, for Asp15 and Aib16 from F22 to V23.

The side chain protecting groups were: tert-butyl for Glu, Ser, Thr and Tyr; trityl for Asn, Gln and His; tert-butoxy-carbonyl for Lys, Trp; and, 2,2,4,6,7-pentamethyldihydrobenzofuran-5-sulfonyl for Arg; His was introduced as Boc-His(Trt)-OH at the end of the sequence assembly. The lysine used for linker-lipid derivatization was incorporated with a Dde [1-(4,4-dimethyl-2,6-dioxocyclohex-1-ylidene)ethyl] protecting group on the side chain of amino group. The amino acids used for triazole bridge formation were introduced by acylation of Fmoc-L-norleucine-azide-COOH and Fmoc-D-propargyl Gly-COOH. The Dde protecting group of Lys(Dde) was removed by treatment of 2% hydrazine in DMF. The side chain of Lys was derivatized first with Fmoc-Glu-OtBu (γ -glutamic acid) and then with palmitic acid using HOAt and DIC as activators in DMF.

At the end of the synthesis, the dry peptide-resins were individually treated with 25 mL of the cleavage mixture: 88% TFA, 5% phenol, 2% triisopropylsilane and 5% water for 1.5 hours at room temperature. Each resin was filtered and then added to cold methyl-t-butyl ether in order to precipitate the peptide. After centrifugation, the peptide pellets were washed with fresh cold methyl-t-butyl ether to remove the organic scavengers. The process was repeated twice. Final pellets were dried, resuspended in H₂O, 20% acetonitrile, and lyophilized.

The crude peptide (200 mg in 2.5 ml of DMSO) was purified by reverse-phase HPLC using preparative Waters Deltapack C4 (40 x 200 mm, 15 μ m, 300Å) and using as eluents (A) 0.1% TFA in water and (B) 0.1% TFA in acetonitrile. The following gradient of eluent B was used: 35%B to 35%B over 5 min, 35%B to 55%B over 25min-80%B, flow rate 80 mL/min, wavelength 214 nm.

Reaction to form the triazole containing ring

To the mixture of linear precursor (71 mg) in DMSO (5.2 ml) was added CuSO₄·5H₂O (3 eq) in water (0.7ml) followed by a solution of sodium ascorbate (5 eq) in water (0.9 mL). After completion of the reaction TFA was added and mixture purified by prep HPLC.

The crude peptide was purified by reverse-phase HPLC using preparative Waters Deltapack C4 (40 x 200 mm, 15 μ m, 300Å) and using as eluents (A) 0.1% TFA in water and (B) 0.1% TFA in acetonitrile 3%B to 30%B over 5 min, 30%B to 50%B over 25min-80%B, flow rate 80 mL/min, wavelength 214 nm.

The crude peptide was purified by reverse-phase HPLC using preparative Waters Deltapak C4 (40 x 200 mm, 15 μ m, 300Å) and using as eluents (A) 0.1% TFA in water and (B) 0.1% TFA in acetonitrile 30%B to 30%B over 5 min, 30%B to 50%B over 25min-80%B, flow rate 80 mL/min, wavelength 214 nm. The final peptide was characterized on an Acquity UPLC
5 Waters Chromatograph, with BEH130 C4 Acquity Waters 2.1x100 mm, 1.7 μ m, at 45°C, using H₂O, 0.1% TFA (A) and CH₃CN, 0.1% TFA (B) as solvents. The peptide was characterized by electrospray mass spectrometry on a Acquity SQ Detector (MW found: 3843.41 Da; MW expected: 3843.30).

10

EXAMPLE 3

Activity of the peptides at the Glucagon receptor (GCGR) and GLP-1 receptor (GLP1R) was measured in a cAMP activity assay.

Peptides were dissolved in 100% DMSO and serially diluted to generate 10 point titrations. The peptide solutions were then transferred into 384-well assay plates (150 nL/well).
15 Assay ready frozen cells expressing human GLP1R or human GCGR were suspended in growth media consisting of DMEM medium (GIBCO), 10% FBS (GIBCO), 1x NEAA(GIBCO), 1x P/S (GIBCO), 10ug/ml Blasticidin (GIBCO) and 200 μ g/mL Hygromycin (GIBCO). Cells were then diluted in assay buffer consisting of PBS (GIBCO), 7.5% BSA (Perkin Elmer), 100 μ M RO 20-1724 (Sigma), with or without 20% human serum (MP Biomedical). The cell suspensions (15
20 μ L) were then added to the assay plates containing the peptide solutions (30,000 cells/well for human GCGR; 10,000 cells/well for human GLP1R). The cells were incubated for 1 hour at room temperature in the dark. Production of cAMP was determined using HitHunter™ cAMPXS kits (DiscoverX) following manufacturer protocol. The plates were incubated for overnight at room temperature in the dark. Luminescence was measured using an EnVision
25 Multilabel plate reader (Perkin Elmer). Native GLP-1 and Glucagon (Bachem) are used as control peptides. EC₅₀ values were calculated using a 4 parameter logistic fit based on the Levenberg-Marquardt algorithm.

The peptides of the present invention have EC₅₀ values at each of the glucagon and GLP-1 receptors that are less than 5 nM. The peptides in SEQ ID Nos. 6-28 have the specific
30 glucagon receptor EC₅₀ values, and GLP-1 receptor EC₅₀ values shown in Table 2.

Table 2				
SEQ ID NO:	STRUCTURE	GCGR EC50 human (nM)	GLP1 R EC50 human (nM)	hGCG R/hGL P1R (hTone)
6	HsQGTFTSDK(γ E γ EC16)SKYLDERAANle(ϵ N ₃)*DFvpra*WLLD T-NH ₂	0.09	0.22	0.4
7	HsQGTFTSDK(γ E γ EC16)SKYLDERAApra*DFVNle(ϵ N ₃)*WLLD T-NH ₂	0.04	0.042	0.95
8	HsQGTFTSDKSKYLDERAANle(ϵ N ₃)*DFvpra*WLLDT-NH ₂	0.06	0.03	1.78
9	HsQGTFTSDKSKYLDERAApra*DFVNle(ϵ N ₃)*WLLDT-NH ₂	0.323	0.168	1.92
10	HUQGTFTSDKSKYLDURAAQDFVNle(ϵ N ₃)*WLMpra*TK γ E-NH ₂	1.07	0.14	7.37
11	HUQGTFTSDKSKYLDURAAQDFvpra*WLMNle(ϵ N ₃)*TK γ E-NH ₂	5	3.11	NA
12	HsQGTFTSDK(γ E γ EC16)SKYLDpra*RAANle(ϵ N ₃)*DFVQWLLDT-NH ₂	0.03	0.034	0.8
13	HsQGTFTSDK(γ E γ EC16)SKYLDARAApra*DFVNle(ϵ N ₃)*WLLD T-NH ₂	0.052	0.123	0.4
14	HsQGTFTSDK(γ E γ EC16)SKYLDApra*AAQNle(ϵ N ₃)*FVQWLLD T-NH ₂	0.279	0.54	0.5
15	HsQGTFTSDK(γ E γ EC16)SKYLDARAQDFVpra*WLLNle(ϵ N ₃)*T-NH ₂	0.143	0.199	0.72
16	HUQGTFTSDK(γ E γ EC16)SKYLDpra*RAANle(ϵ N ₃)*DFVQWLNle-DT-NH ₂	0.048	0.042	1.13
17	HUQGTFTSDKE γ EC16)SKYLDURAAApra*DFVNle(ϵ N ₃)*WL-Nle-DT-NH ₂	0.286	0.127	2.25
18	HUQGTFTSDK(γ E γ EC16)SKYLDUpa*AAQNle(ϵ N ₃)*FVQWLNle-DT-NH ₂	0.819	0.414	1.96

19	HUQGTFTSDK(γ E γ EC16)SKYLDURAAQDFVpra*WLNleNle(ϵ N ₃)*T-NH ₂	0.208	0.211	0.99
20	HUQGTFTSDK(γ E γ EC16)SKYLDpra*RAANle(ϵ N ₃)*DFVQWL2D TK γ E-NH ₂	0.134	0.027	5.04
21	HUQGTFTSDK(γ E γ EC16)SKYLDURAApra*DFVNle(ϵ N ₃)*WL2D TK γ E-NH ₂	0.107	0.024	4.5
22	HUQGTFTSDK(γ E γ EC16)SKYLDUpa*AAQNle(ϵ N ₃)*FVQWL2D TK γ E-NH ₂	0.25	0.041	6.17
23	HUQGTFTSDK(γ E γ EC16)SKYLDURAAQDFVpra*WL2Nle(ϵ N ₃)* TK γ E-NH ₂	0.109	0.025	4.3
24	HsQGTFTSDK(γ E γ EC16)SKYLDARAAQDFVNle(ϵ N ₃)*WLLpra* T-NH ₂	0.059	0.109	0.54
25	HUQGTFTSDK(γ E γ EC16)SKYLDAcpra*AAQNle(ϵ N ₃)*FVQWL2D TK γ E-NH ₂	0.064	0.042	1.52
26	HUQGTFTSDK(γ E γ EC16)SKYLDAcRAApra*DFVNle(ϵ N ₃)*WL2DT K γ E-NH ₂	0.077	0.042	1.84
27	HUQGTFTSDK(γ E γ EC16)SKYLDAcRAAQDFVpra*WL2Nle(ϵ N ₃)*T K γ E-NH ₂	0.139	.042	3.3
28	HsQGTFTSDK(γ E γ EC16)SKYLDApra*AAQDFVPeg ₃ N ₃ Ala*WLLDT-NH ₂	0.115	0.416	0.28

EXAMPLE 4

Thioflavin T Assay

- The physical stability of the stapled peptides may be tested in a Thioflavin T Assay (Schlein, Morten; The AAPS Journal, Vol. 19, No. 2, March 2017)) to determine the amount of time before fibril formation commences.

WHAT IS CLAIMED

1. A peptide comprising the amino acid sequence of native human glucagon

5 HSQGTFTSDYSKYLD SRRAQDFVQWLMNT (SEQ ID NO:1)

wherein

- 1) L-Serine at X² is replaced with alpha-aminoisobutyric acid, or D-Serine;
- 2) Tyrosine at X¹⁰ is replaced with is Lysine, Lysine conjugated to a fatty acid, or Lysine conjugated to a fatty diacid;
- 10 3) L-Serine at X¹⁶ is replaced with alpha-aminoisobutyric acid, Alanine, Glutamic acid, pra or Acb;
- 4) Arginine at X¹⁸ is replaced with Alanine;
- 5) X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid; and may include up to six additional amino acid substitutions selected from:
- 15 1) Arginine at X¹⁷ is optionally replaced with pra;
- 2) Glutamine at X²⁰ is optionally replaced with Nle(ϵ N₃), or pra;
- 3) Aspartic acid at X²¹ is optionally replaced with Nle(ϵ N₃);
- 4) Glutamine at X²⁴ is optionally replaced with Nle(ϵ N₃), pra or Acb;
- 5) Methionine at X²⁷ is optionally replaced with Leucine, Norleucine, or L-Methionine
- 20 sulphone;
- 6) Asparagine at X²⁸ is optionally replaced with Aspartic acid, Nle(ϵ N₃), or pra;

provided the peptide contains at least one Nle(ϵ N₃) and one pra, or one Peg₃N₃Ala and one pra; wherein Nle(ϵ N₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize

25 to form a triazole containing ring; and

wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(ϵ N₃) is 6-Azido-L-norleucine, Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid;

or a pharmaceutically acceptable salt thereof.

30

2. The peptide of Claim 1 comprising the formula

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO: 29)

wherein

X² is alpha-aminoisobutyric acid, or D-Serine;

5 X¹⁰ is Lysine, Lysine conjugated to a fatty acid, or Lysine conjugated to a fatty diacid;

X¹⁶ is alpha-aminoisobutyric acid, Alanine, Glutamic acid, pra or Acb;

X¹⁷ is Arginine, or pra;

X²⁰ is Glutamine, Nle(εN₃), or pra;

X²¹ is Aspartic acid, or Nle(εN₃);

10 X²⁴ is Glutamine, Nle(εN₃), pra or Acb;

X²⁷ is Leucine, Methionine, Norleucine, or L-Methionine sulphone;

X²⁸ is Aspartic acid, Nle(εN₃), or pra;

X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid;

15 provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra; wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra cyclize to form a triazole containing ring;

wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(εN₃) is 6-Azido-L-norleucine, Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-

20 ynoic acid; and

wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide;

or a pharmaceutically acceptable salt thereof.

25 3. The peptide of Claim 2, wherein the fatty diacid comprises a C14, C15, C16, C17, C18, C19, or C20 fatty diacid, and the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid; or a pharmaceutically acceptable salt thereof.

30 4. The peptide of Claim 2, wherein X¹⁰ is Lysine, or Lysine conjugated to a fatty acid; or a pharmaceutically acceptable salt thereof.

5. The peptide of Claim 2, wherein X¹⁰ is Lysine, or Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker; or a pharmaceutically acceptable salt thereof.

5 6 The peptide of Claim 2, wherein X¹⁰ is Lysine or Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker; or a pharmaceutically acceptable salt thereof.

7. The peptide of Claim 2, wherein X³⁰ is absent; or a pharmaceutically acceptable salt thereof.

8. The peptide of Claim 1 comprising the formula

HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO: 29)

wherein

X² is alpha-aminoisobutyric acid, or D-Serine;

X¹⁰ is Lysine, or Lysine conjugated to a fatty acid;

X¹⁶ is alpha-aminoisobutyric acid, Alanine, Glutamic acid, pra or Acb;

20 X¹⁷ is Arginine, or pra;

X²⁰ is Glutamine, Nle(εN₃), or pra;

X²¹ is Aspartic acid, or Nle(εN₃);

X²⁴ is Glutamine, Nle(εN₃), pra or Acb;

X²⁷ is Leucine, Methionine, Norleucine, or L-Methionine sulphone;

25 X²⁸ is Aspartic acid, Nle(εN₃), or pra;

X³⁰ is absent or Lysine linked at the C-terminus to gamma-Glutamic acid;

provided the peptide contains at least one Nle(εN₃) and one pra, or one Peg₃N₃Ala and one pra;

wherein Nle(εN₃) and pra cyclize to form a triazole containing ring, or Peg₃N₃Ala and pra

30 cyclize to form a triazole containing ring;

wherein Acb is 1-aminocyclobutane-1-carboxylic acid, Nle(ϵ N₃) is 6-Azido-L-norleucine, Peg₃N₃Ala is O-(2-(2-(2-azidoethoxy)ethoxy)ethyl)-L-serine, and pra is (R)-2-aminopent-4-ynoic acid; and

wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide;
 5 or a pharmaceutically acceptable salt thereof.

9. The peptide of Claim 8, wherein the fatty acid at position 10 comprises a C14, C16, C17, C18, C19, or C20 fatty acid; or a pharmaceutically acceptable salt thereof.
 10

10. The peptide of Claim 8, wherein X¹⁰ is Lysine, or Lysine conjugated to a fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker; or a pharmaceutically acceptable salt thereof.

11. The peptide of Claim 8, wherein X¹⁰ is Lysine or Lysine conjugated to a C16 fatty acid via a gamma-glutamic acid – gamma-glutamic acid linker;
 15 or a pharmaceutically acceptable salt thereof.

12. The peptide of Claim 2, wherein X³⁰ is absent; or a pharmaceutically acceptable salt thereof.
 20

13. The peptide of Claim 1 comprising the formula
 HX²QGTFTSDX¹⁰SKYLDX¹⁶X¹⁷AAX²⁰X²¹FVX²⁴WLX²⁷X²⁸TX³⁰-NH₂ (SEQ ID NO:
 25 29)
 wherein

X² is alpha-aminoisobutyric acid, or D-Serine;

X¹⁰ is Lysine or Lysine conjugated to a gamma-Glutamic acid-gamma Glutamic acid – C16 fatty acid;

30 X¹⁶ is alpha-aminoisobutyric acid, or Alanine;

X¹⁷ is Arginine;

X²⁰ is Glutamine;

- X²¹ is Aspartic acid;
X²⁴ is pra;
X²⁷ is Leucine, or Norleucine;
X²⁸ is Nle(εN₃);
5 X³⁰ is absent;
wherein Nle(εN₃) and pra cyclize to form a triazole containing ring;
wherein Nle(εN₃) is 6-Azido-L-norleucine, and pra is (R)-2-aminopent-4-ynoic acid; and
wherein the peptide optionally includes a protecting group that, if present, is joined to the C-terminal carboxy group of the peptide;
10 or a pharmaceutically acceptable salt thereof.
14. The peptide of Claim 13, wherein X¹⁰ is Lysine; or a pharmaceutically acceptable salt thereof.
- 15 15. The peptide of Claim 13, wherein X¹⁰ is Lysine conjugated to a gamma-Glutamic acid-gamma Glutamic acid – C16fatty acid; or a pharmaceutically acceptable salt thereof.
16. A composition comprising a peptide of Claim 1, or a pharmaceutically acceptable salt thereof, and a pharmaceutically acceptable carrier.
20
17. A method for treating a patient for a metabolic disease or disorder comprising administering the patient an effective amount of any one or more of the peptides of Claim 1, or a pharmaceutically acceptable salt thereof, to treat the metabolic disease or disorder in the patient.
- 25 18. The method of Claim 17, wherein the metabolic disease or disorder comprises diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity.
19. The method of Claim 18, wherein the diabetes comprises Type I diabetes, Type II
30 diabetes, or gestational diabetes.

20. A method for treating a patient for a metabolic disease or disorder comprising administering the patient an effective amount of the composition of Claim 16 to treat the metabolic disease or disorder in the patient.

5 21. The method of Claim 20, wherein the metabolic disease or disorder comprises diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or obesity.

22. Use of a peptide of Claim 1, or a pharmaceutically acceptable salt thereof, for the
10 manufacture of a medicament for the treatment of a metabolic disease or disorder.

23. The use of Claim 22, wherein the metabolic disease or disorder comprises diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or
15 obesity.

24. The use of Claim 23, wherein the diabetes comprises Type I diabetes, Type II diabetes, or gestational diabetes.

25. A method for treating a metabolic disease or disorder in a patient or individual
20 comprising: administering to the patient or individual an effective amount of a peptide of Claim 1, or a pharmaceutically acceptable salt thereof, and administering to the patient or individual an effective amount of a composition comprising an insulin or insulin analog to treat the metabolic disease or disorder in the patient or individual.

26. The method of Claim 25, wherein the insulin analog comprises insulin detemir, insulin glargine, insulin levemir, insulin glulisine, insulin degludec, or insulin lispro.

27. The method of Claim 26, wherein the metabolic disease or disorder comprises diabetes, non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), or
30 obesity.

28. The method of Claim 27, wherein the diabetes comprises Type I diabetes, Type II diabetes, or gestational diabetes.