Discovery of a multispecific CD73/PD-1 targeting Drug Fc-Conjugate (DFC), which improves tumor reduction compared to PD-1 monotherapy in a humanized mouse model

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BACKGROUND

The approval of PD-(L)1 axis inhibitors have firmly established immunotherapy as an effective cancer treatment option with reduced adverse effects compared with conventional chemotherapy¹. However, while anti-PD-(L)1 therapy has demonstrated durable responses, only a small subset of patients respond. One mechanism of tumor escape from anti-PD-1 therapy is via the release of immunosuppressive metabolites such as adenosine. CD73, an extracellular enzyme expressed on immune cells and some tumors, catalyzes the rate limiting step in adenosine production, the conversion of AMP to adenosine² (Figure 1A/B). As a strategy to improve response rates, we developed a first-inclass multispecific CD73/PD-1 targeting DFC. Herein, we describe CD73/PD-1-001, a dual targeting DFC comprising a multivalent conjugate of a small molecule CD73 inhibitor stably linked to a proprietary human IgG1 Fc-fusion with a PD-1 inhibitor peptide (Figure 2). This multispecific DFC has the potential for differentiation and increased therapeutic efficacy compared to approved PD-(L)1 inhibitors.

Figure 1. Immune suppression by PD-1 and CD73 checkpoint pathways (A). Release of immune blockade by simultaneous targeting of PD-1 and CD73 (B).



Figure 2. CD73 (left) and PD-1 (center) DFCs. Bispecific CD73/PD-1 DFC (rt).



METHODS

Binding of PD-1-001 and CD73/PD-1-001 to biotinylated hPD-L1 was measured by ELISA; test articles were also evaluated in a functional hPD-1 blockade assay (Promega #J1250). CD73 binding was evaluated by surface plasmon resonance (SPR) (ACROBiosystems) Efficacy was evaluated in transgenic mice expressing human PD-1 and PD-L1 with MC-38 (hPD-L1) tumors (genOway, France) (n=10). MC-38 (hPD-L1) cells were injected at a concentration of 10⁶ cells mixed 1:1 with Matrigel (Corning). Treatment was initiated when tumor sizes were 25 – 75 mm³. Test articles were dosed IP twice weekly for 3 weeks. As a comparator, a pembrolizumab biosimilar (Bio-X-Cell #SIM0010) was included. Tumor volumes were recorded, and statistical analysis was conducted by t-test (Mann-Whitney) or two-way ANOVA. *p≤0.05; **p≤0.01.

The PK of test articles was determined in BALB/c mice. DFCs were injected IP at 10 mg/kg (n=2) and plasma collected at various time points over one-week (168h). Plasma levels of DFCs were determined by indirect ELISA techniques with CD73 or hPD-1-001 capture, and a sandwich ELISA with human Fc capture. The activity of DFCs was determined in a Mixed Lymphocyte Reaction (MLR) assay. Briefly, human CD14⁺ monocytes were differentiated into mature dendritic cells and incubated with CD4⁺ cells from three separate donors in the presence/absence of AMP (300 µM). After four days supernatants were analyzed for cytokines (INF- γ , IL-2, TNF- α).

RESULTS

In vitro characterization of PD-1-001 and CD73/PD-1-001. The binding affinity of CD73/PD-1-001 for CD73 was determined by SPR using the Biacore 8k system (Cytiva). CD73/PD-1-001 was found to have a K_D of 0.66 nM confirming that it binds CD73 with high affinity. Multiple assays were used to confirm that PD-1-001 and CD73/PD-1-001 bind to hPD-1 with high affinity. Binding of both molecules to immobilized hPD-1 was measured by ELISA and found to be virtually identical with average EC_{50} 's from two assays of 0.055 and 0.064 nM for PD-1-001 and CD73/PD-1-001, respectively (Figure 3). A cell-based functional hPD-1/hPD-L1 signaling assay was used to compare CD73/PD-1-001 to approved PD-1 inhibitors. In this assay CD73/PD-1-001 was potent, demonstrating in vitro activity within ~2-fold of pembrolizumab, and ~5-fold of nivolumab biosimilars (Table 1).

Figure 3. Binding of DFCs to immobilized hPD-1



In vivo characterization of PD-1-001 and CD73/PD-1-001 in a humanized mouse model. In transgenic mice expressing hPD-1/L1 a pembrolizumab biosimilar at 10 mg/kg had minimal effects on tumor growth (<10% TGI). Similarly, a CD73 only targeting DFC did not significantly reduce tumor growth (<20% TGI; Data not shown). In contrast, our proprietary anti-PD-1 inhibitor, PD-1-001, dosed at 10 mg/kg significantly reduced tumor growth (TGI of ~58%; p≤0.01). Nearly identical tumor volume reductions were also achieved with the multispecific CD73/PD-1-001 construct at 3 and 10 mg/kg (Data not shown).

In a follow-up study both DFCs were dose ranged at 1, 3, and 10 mg/kg. At the lowest test concentration (1 mg/kg) the DFCs began to differentiate, with CD73/PD-1-001 achieving a statistically significant reduction in tumor volume (p≤0.05) and a TGI of ~56% while PD-1-001 did not reach significance (Figure 4). At 3 and 10 mg/kg the dual inhibitor further increased TGI to 72.0 and 74.5% respectively. Similarly, PD-1-001 was significantly active at 3 and 10 mg/kg with TGI's of 71.4 and 80.8% respectively (Data not shown). The observation that PD-1-001 and CD73/PD-1-001 are differentiated at 1 mg/kg highlights the improved therapeutic potential of a dual CD73 and PD-1 targeting DFC. Figure 4. Efficacy of test articles in a transgenic mouse model.



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	Table 1. hPD-1 Block	able 1. hPD-1 Blockade assay		
1	Test article	<u>Target</u>	<u>EC₅₀ (nM)</u>	
	CD73/PD-1-001	CD73/PD-1	33.96	
	Pembrolizumab*	PD-1	18.10	
	Nivolumab [*]	PD-1	7.22	
	*biosimilar			







