





Pilaralisib

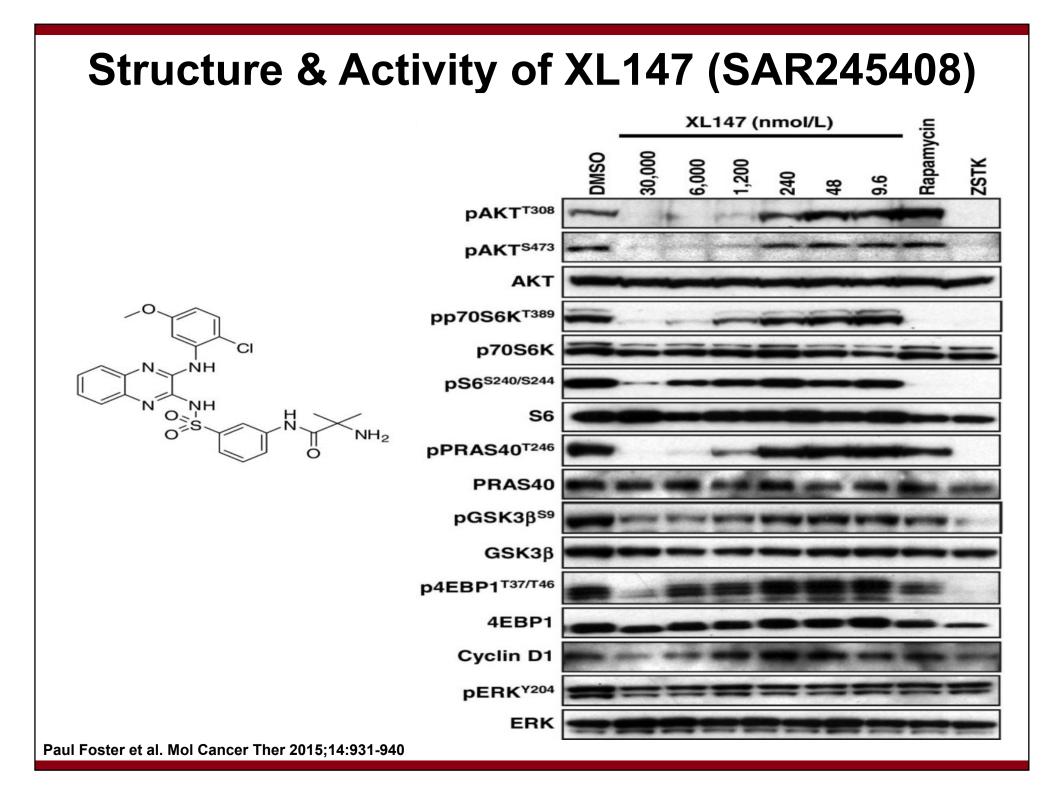
Jennifer R Brown, MD PhD Director, CLL Center Dana-Farber Cancer Institute Associate Professor Harvard Medical School November 14, 2017

IC₅₀ Values (nM) of Selected PI3K Inhibitors Against Recombinant Enzymes

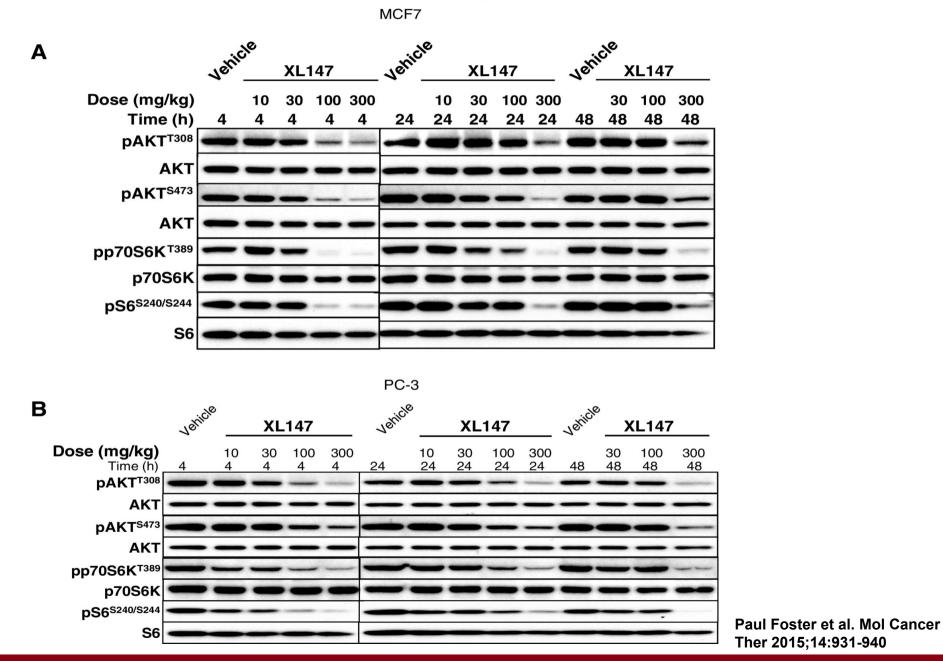
Drug Name	p110α	p110β	p110δ	p110γ
Idelalisib	820	565	2.5	89
Duvelisib	1602	85	2.5	27
Umbralisib	>10000	1116	22	1065
Copanlisib	0.5	3.7	0.7	6.4
INCB050465	>20000	>20000	1	>20000
ACP-319	33000	270	18	85
Pilaralisib	39	383	36	23
Voxtalisib	39	110	43	9

Kinase Activity of Pilaralisib

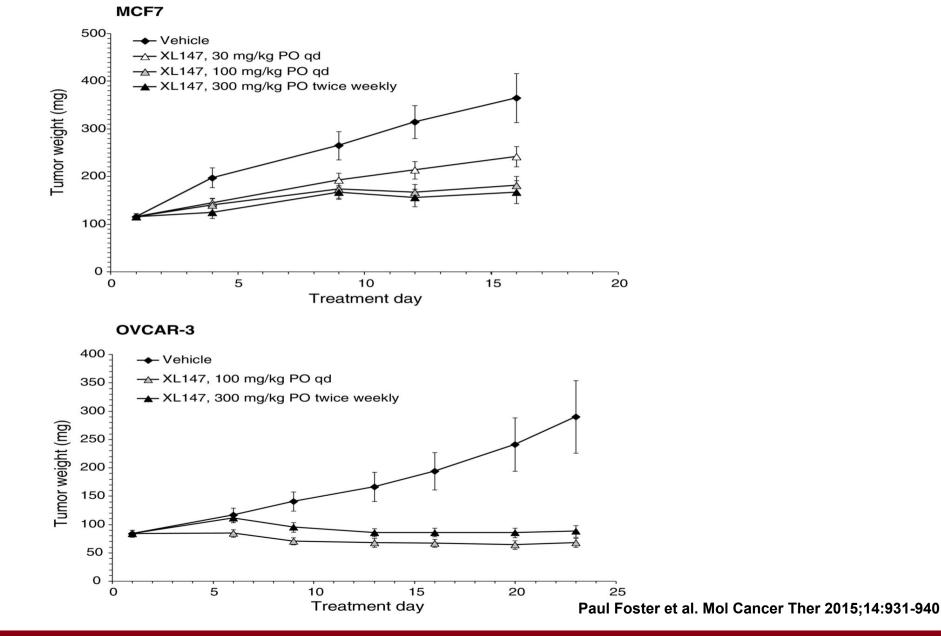
Family	Kinase	XL147, IC ₅₀ ± SEM (nM)
PI3K		
Class I _A	ΡΙ3Κα	39 ± 10 / 48
	ΡΙ3Κβ	383 ± 78 / 617
	ΡΙ3Κδ	36 ± 8 / 260
Class I _B	ΡΙ3Κγ	23 ± 8 / 10
Class III	VPS34	6,974
PI3K related	DNA-PK	4,750 ± 2,000
	mTOR	>15,000



XL147 Inhibits PI3K Signaling in MCF7 and PC-3 Tumors



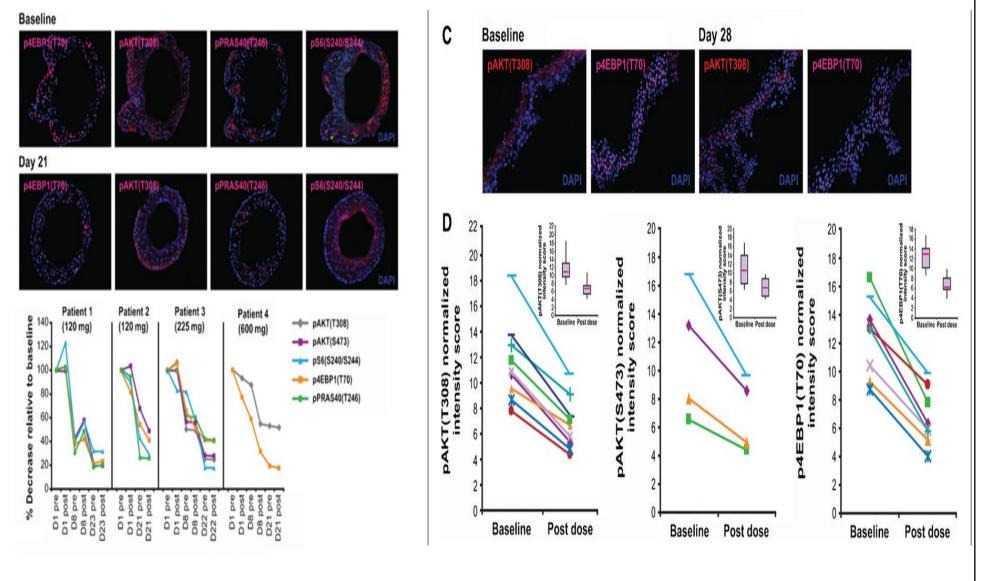
XL147 Inhibits Tumor Growth and/or Causes Regression of Established Xenograft Tumors



Solid Tumor Studies

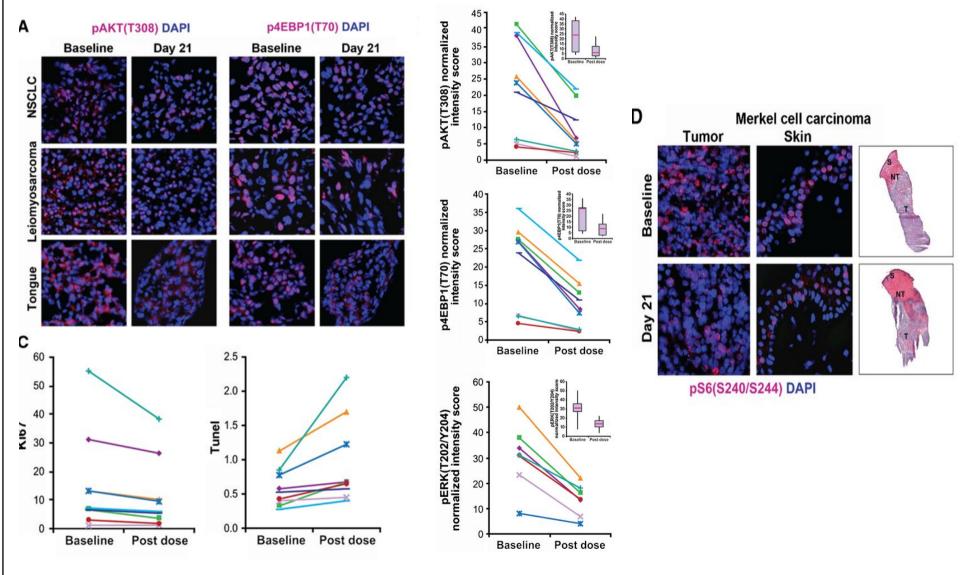
- Phase 1 open label dose escalation study using capsule formulation, with std 3+3 escalation in two cohorts:
 - Continuous daily dosing
 - 1st 21 out of 28 days
- 68 patients were treated
 - In the 21/7 cohort, 1 gr 3 rash at 600 mg, 2 gr 3 rash at 900 mg, defining 600 mg as the MTD
 - With CDD, one potential DLT of gr 3 hypersensitivity at 600 mg, leading to 600 mg as selected dose
 - Best response was 44% SD; 8 lasted > 6 mos

Reduction of PI3K Signaling by SAR245408 in Serial Hair Cells and Skin Biopsies



Geoffrey I. Shapiro et al. Clin Cancer Res 2014;20:233-245

Reduction in PI3K Signaling by SAR245408 in Paired Tumor Biopsies

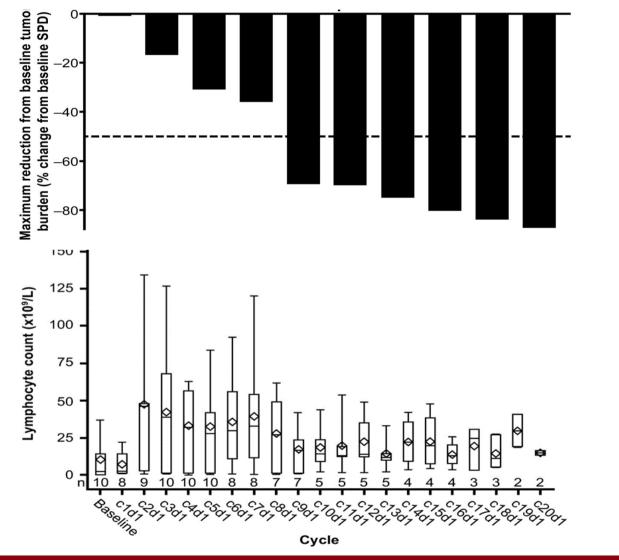


Geoffrey I. Shapiro et al. Clin Cancer Res 2014;20:233-245

Phase 1b Study in CLL / Lymphoma

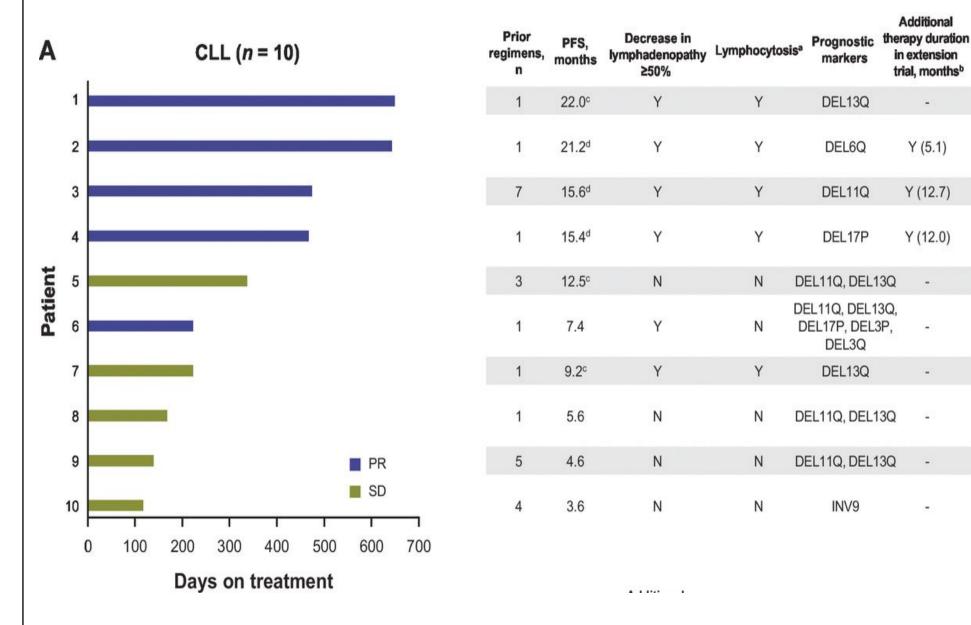
- Pilaralisib (SAR245408, XL147) at its solid tumor MTD 600 mg daily
- N=25: 10 CLL, 15 relapsed/refractory lymphoma
 - Median age 66
 - Refractory: 40% CLL, 47% lymphoma
 - CLL: 80% bulky
 - -2 with 17p deln, 5 with 11q deln

Effect of Pilaralisib 600 mg Once Daily on Nodes and Lymphocyte Counts in Patients with CLL

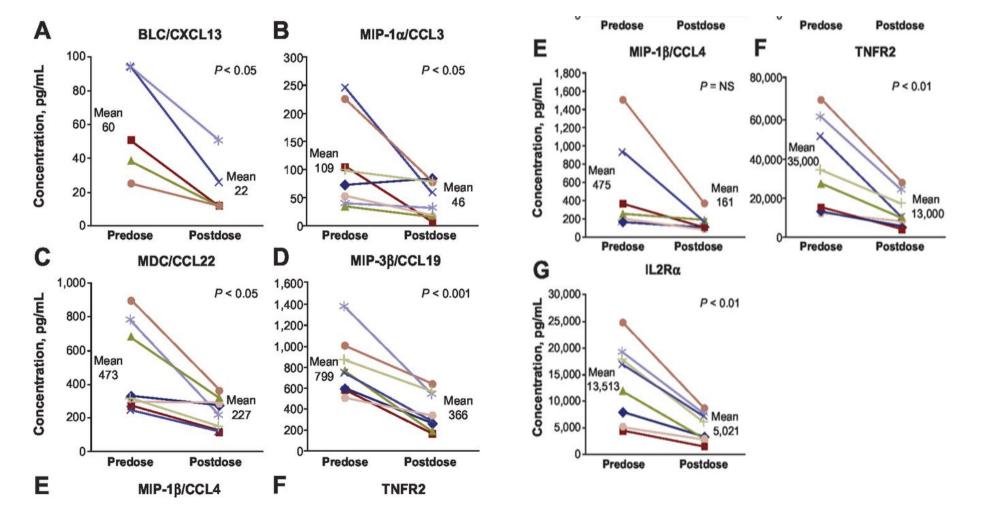


Jennifer R. Brown et al. Clin Cancer Res 2015; 21:3160-3169

Pilaralisib (SAR245408): CLL Efficacy



Effect of Pilaralisib on Chemokines Involved in B-Cell Trafficking and Cytokine Receptors in Patients with CLL



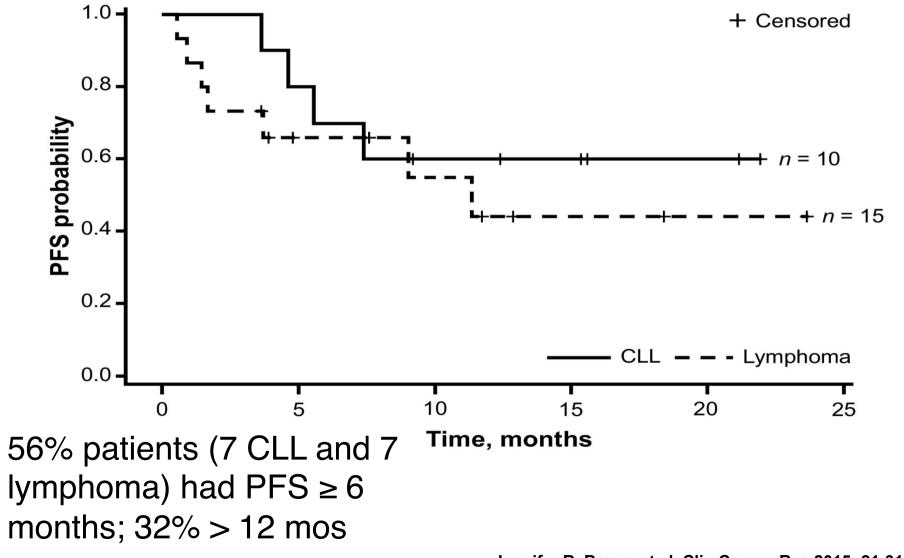
Jennifer R. Brown et al. Clin Cancer Res 2015; 21:3160-3169

Pilaralisib (SAR245408): Lymphoma Efficacy

Additional

в		Lymphoma (<i>n</i>	Prior regimens, n	PFS, months	therapy duration in extension trial, months ^b	
11	1		PR	2	23.7 ^d	Y (16.3)
12	2		PR ^e	1	18.4 ^d	Y (16.3)
1:	3	SD		4	12.9 ^d	Y (17.4)
14	4	SD		6	11.4	
1	5	SDf		0	11.8°	-
10	6	SD		2	9	-
Patient	7	SD		4	7.6 ^c	-
18 Ite	8 PR			3	4.8°	-
č 19	9 SD		DLBCL	3	3.7	-
20	0 SD		FL Gr 1–2	2	3.9°	
2	1 SD		FL Gr 3	2	3.7°	-
22	2 💻 PD		HL	2	1.7	-
23	3 💻 PD			4	1.4	-
24			TL	9	0.9	-
2	5 P D			4	0.5	-
	0 100 2	200 300 400 5	00 600 700 80	0		
		Days on treatm				
		buys on reati		Brown et al. C	Clin Cance	er Res 2015; 21:31

Pilaralisib: PFS for CLL vs Lymphoma

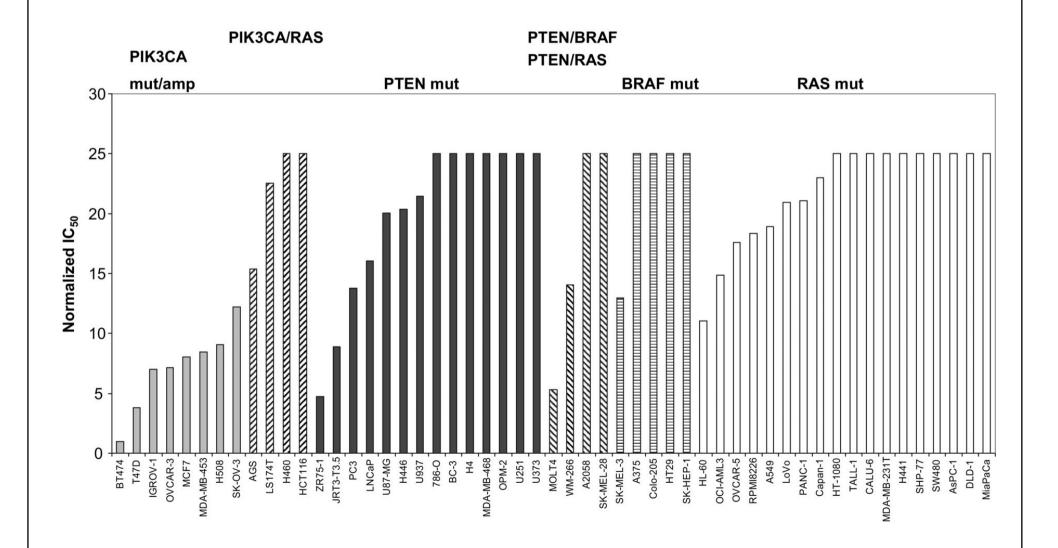


Jennifer R. Brown et al. Clin Cancer Res 2015; 21:3160-3169

Adverse Events in CLL / Lymphoma

Preferred term	CLL (n = 10)	Lymphoma (n=15)	Total (N = 25)		
All-grade AEs, regardless of causa	lity, n (%)				
Patients with any AE	10 (100)	15 (100)	25 (100)		
Diarrhea	8 (80.0)	15 (100)	23 (92.0)		
Pyrexia	6 (60.0)	7 (46.7)	13 (52.0)		
Fatigue	4 (40.0)	7 (46.7)	11 (44.0)		
Anemia	3 (30.0)	7 (46.7)	10 (40.0)		
Cough	3 (30.0)	7 (46.7)	10 (40.0)		
Nausea	4 (40.0)	6 (40.0)	10 (40.0)		
Back pain	3 (30.0)	5 (33.3)	8 (32.0)		
Dyspnea	3 (30.0)	5 (33.3)	8 (32.0)		
Neutropenia	5 (50.0)	3 (20.0)	8 (32.0)		
Rash	2 (20.0)	6 (40.0)	8 (32.0)		
Upper respiratory tract Infection	6 (60.0)	2 (13.3)	8 (32.0)		
Hyperglycemia	4 (40.0)	3 (20.0)	7 (28.0)		
Vomiting	2 (20.0)	5 (33.3)	7 (28.0)		
Grade ≥ 3 AEs, regardless of causa	ality, n (%)				
Patients with any grade ≥ 3 AE	10 (100)	12 (80.0)	22 (88.0)		
Neutropenia	5 (50.0)	3 (20.0)	8 (32.0)		
Diarrhea	3 (30.0)	2 (13.3)	5 (20.0)		
Hypotension	2 (20.0)	1 (6.7)	3 (12.0)		

Response of Cell Lines by PI3K Pathway Mutation



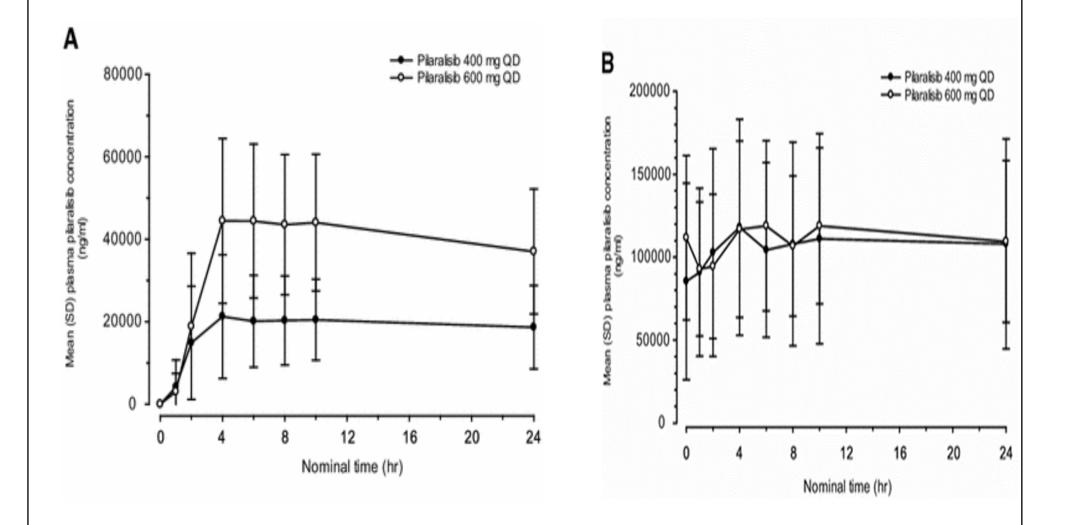
Mutations by Patient: CLL, NHL

	Patient (see		Functional	Protein			Best overa
Disease type	Fig. 3)	Gene	impact	change	Codon change	PFS, months	response
CLL	1	SF3B1	known	K700E	2098A>G	22	PR
		MTOR	known	V2006L	6016G>C		
		SYK	likely	R434Q	1301G>A		
CLL	2	NFATC1	known	G446R	1336G>C	21.2	PR
		POT1	known	Y324S	971A>C		
		DIRAS3	known	R103H	308G>A		
		BIRC3	known	EE430fs	1290_1291insCA		
		MAX	known	T59K	176C>A		
		NCOR1	likely	QK684fs	2052_2053delGA		
		AKAP9	unknown	K1052E	3154A>G		
CLL	3	CAMTA1	unknown	G1175R	3523G>A	15.6	PR
CLL	9	DDX3X	known	K342Splice	1026Splice	4.6	SD
		SF3B1	known	N626H	1876A>C		
DLBCL	16	MLL2	likely	A221fs*40	657_657delC	9	SD
		ARID1A	likely	P1175fs*5	3524_3524delC		
		CREBBP	likely	P1947fs*19	5830_5831insG		
		EZH2	known	Y646H	1936T>C		
		PIK3R1	known	N564D	1690A>G		
		PTCH1	unknown	V1100A	3299T>C		
		RAD50	likely	V683fs*11	2046_2047insC		
		TET2	known	R1516*	4546C>T		
		TP53	known	Y236C	707A>G		
		TP53	known	Y234C	701A>G		
FL	17	CREBBP	likely	R1173*	3517C>T	7.6	SD
		MLL2	likely	S3378*	10133C>G		
		MLL2	likely	A1390fs*42	4162_4163insC		

Mutations by Patient: Lymphoma

FL	18	ARID1A	likely	Q1579*	4735C>T	4.8	PR
		CREBBP	known	S1679del	5034_5036delGAG		
		MED12	known	G44S	130G>A		
		MEF2B	known	E77K	229G>A		
FL	20	MLL2	likely	E5458fs*4	16370_16371insCA	3.9	SD
		MLL2	likely	A1390fs*42	4162_4163insC		
		REL	known	Amplification			
		TP53	known	C176F	527G>T		
DLBCL	22	No alteration detected				1.7	PD
DLBCL	23	CD79B	known	Y196D	586T>G	1.4	PD
		MYD88	known	L265P	794T>C		
		RAD50	unknown	R1256C	3766C>T		
HL	24	CDKN2A	known	A68T	202G>A	11.4	SD

Reformulation Attempt to Increase Exposure?



Summary: Pilaralisib

- Pan-PI3K inhibitor, less potent with exposure plateau
- 50% PR in CLL, 20% PR in lymphoma albeit with some durable remissions
- Insufficient representation of PI3K pathway mutations to associate with response

