

# Identification of a well-tolerated outpatient regimen of intravenous recombinant human interleukin-21 (IL-21) in patients with metastatic melanoma and metastatic renal cell carcinoma

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J. A. Thompson

University of Washington, Seattle, WA

B.D. Curti

Providence Portland Medical Center, Portland, OR

B. G. Redman

University of Michigan, Ann Arbor, MI

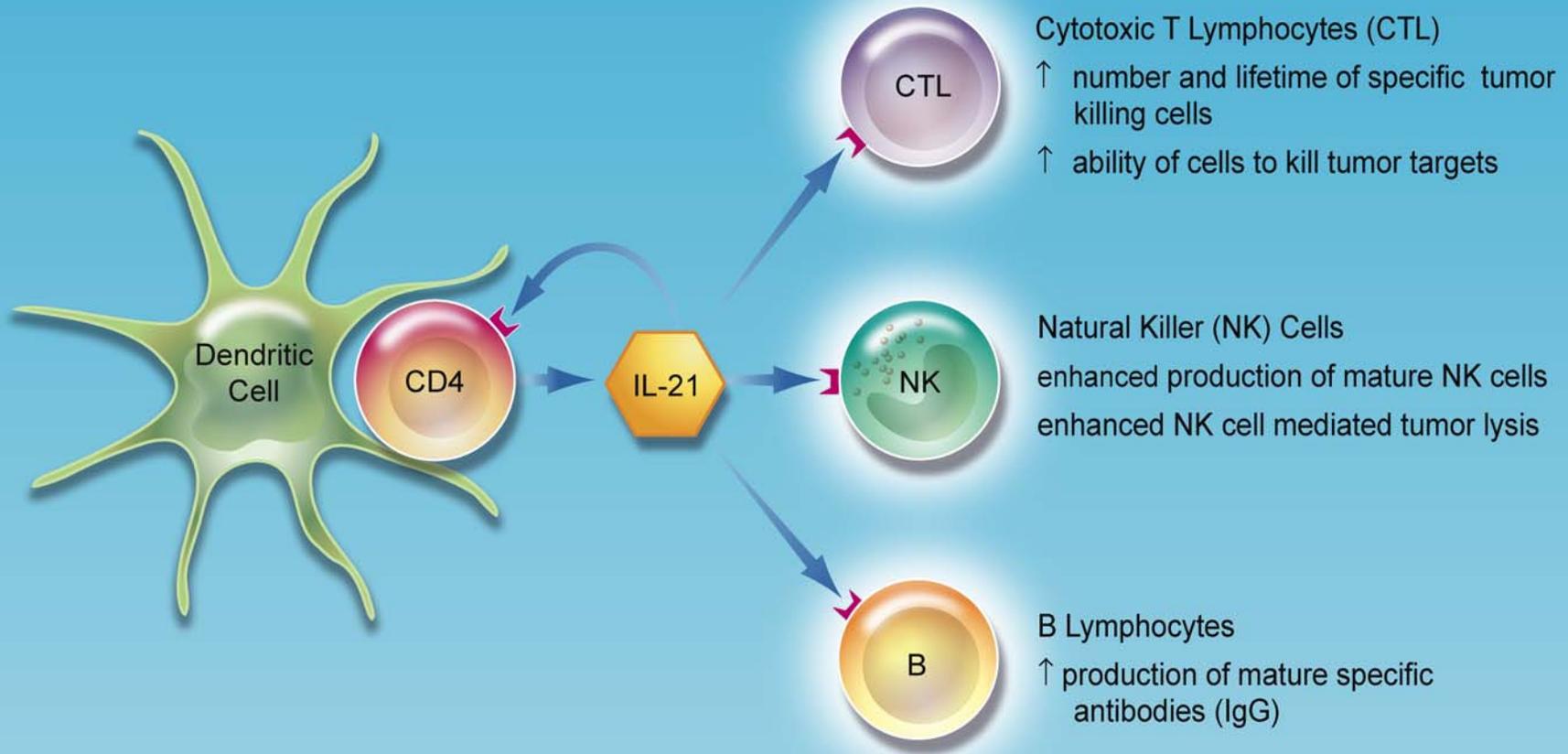
E. L. Sievers

ZymoGenetics Inc., Seattle, WA

# Interleukin 21

- Novel class I cytokine
- Produced by activated CD4+ T cells
- Signals through dimer of unique IL-21 receptor and common gamma chain
- Recombinant IL-21 has demonstrated anti-tumor efficacy in preclinical models

# IL-21 Elicits Pleiotropic Immune Modulation



# Open Label, Phase 1 Dose Escalation Study

- Population
  - Patients with measurable metastatic melanoma or renal cell carcinoma
- Objectives
  - Primary
    - Determine maximum tolerated dose of IL-21 (using CTCAE criteria)
  - Secondary
    - Pharmacokinetics
    - Immunogenicity
    - Clinical or biological parameters that may correlate with efficacy
    - Anti-tumor effect

# Key inclusion criteria

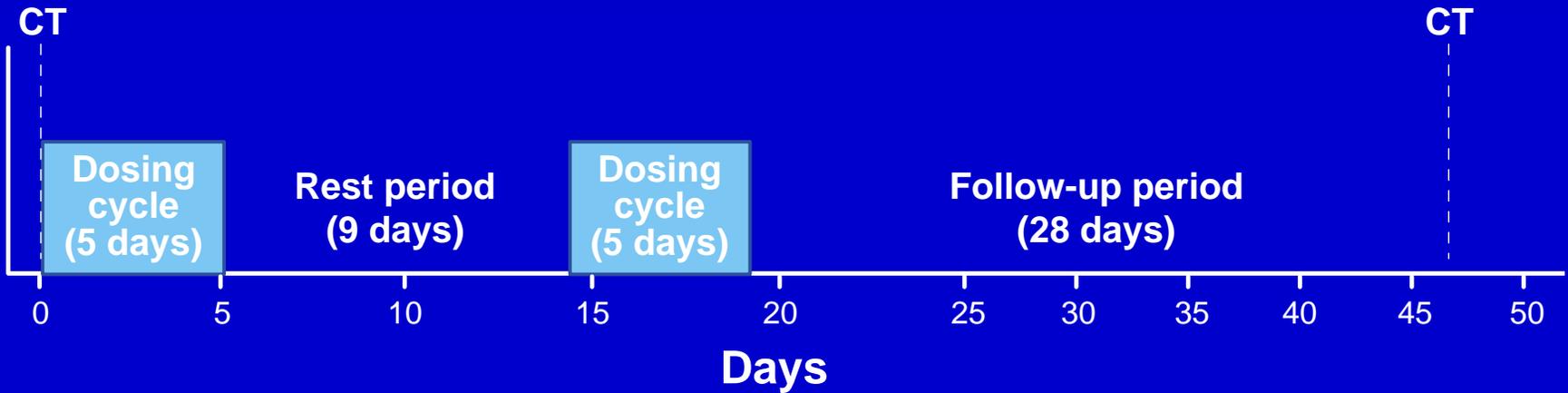
- Metastatic melanoma (non ocular) or metastatic renal cell carcinoma (clear cell)
- ECOG 0 or 1
- “Standard” laboratory parameters
- No more than one prior treatment
- Hemoglobin > 12 g/dL

# Part 1a

## Study Demographics (n = 15)

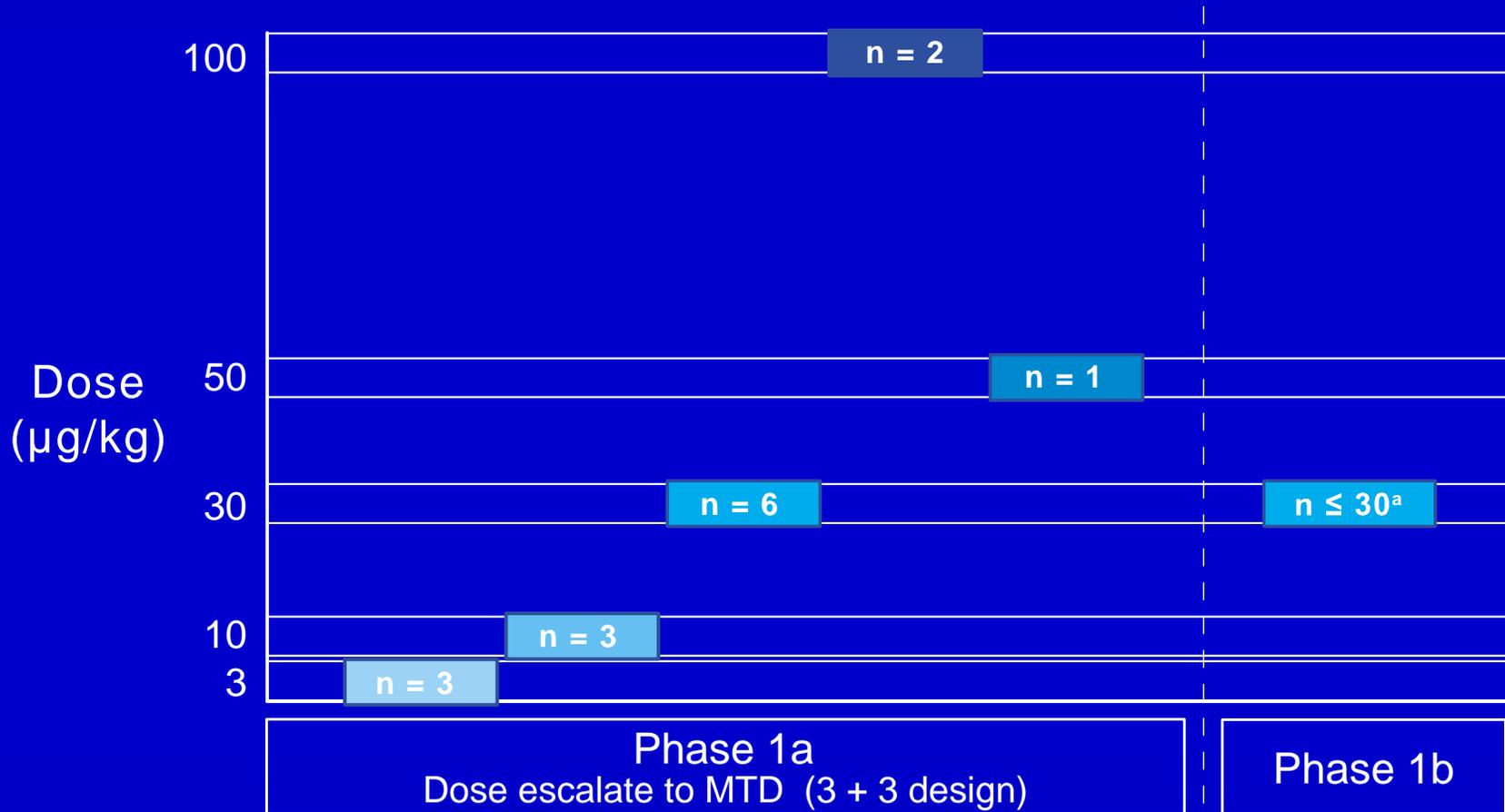
- Gender
  - Male 13
  - Female 2
- Age, median (range) 61 (39 – 76)
- Malignancy
  - Melanoma 9
  - Renal Cell 6
- Mean years since diagnosis 4
- Number with prior immunotherapy
  - IL-2 5
  - Interferon 4

# IL-21 Treatment Schedule



Dosing cycle = 5 consecutive daily doses of IL-21 delivered by IV push in the outpatient setting

# IL-21 Monotherapy Phase 1 Study (U.S.)



<sup>a</sup> n = up to 30 subjects (15 of each disease type) including Phase 1a subjects dosed at 30 µg/kg

# IL-21 Safety

- All but 2 adverse events were mild to moderate in severity
- Most common adverse events
  - Fatigue, Pyrexia, Arthralgia, Chills, Headache, Myalgia, Rash
- Grade 3 or higher adverse events included
  - Grade 4 acute liver toxicity probably related to IL-21 (occurred in Cycle 4) – 30 µg/kg
  - Grade 3 hemoptysis unrelated to IL-21 – 3 µg/kg
- 0/15 patients treated with  $\leq 2$  cycles developed specific antibody response

## Most Common Adverse Events through 2 Cycles by Dose ( $\mu\text{g}/\text{kg}$ )

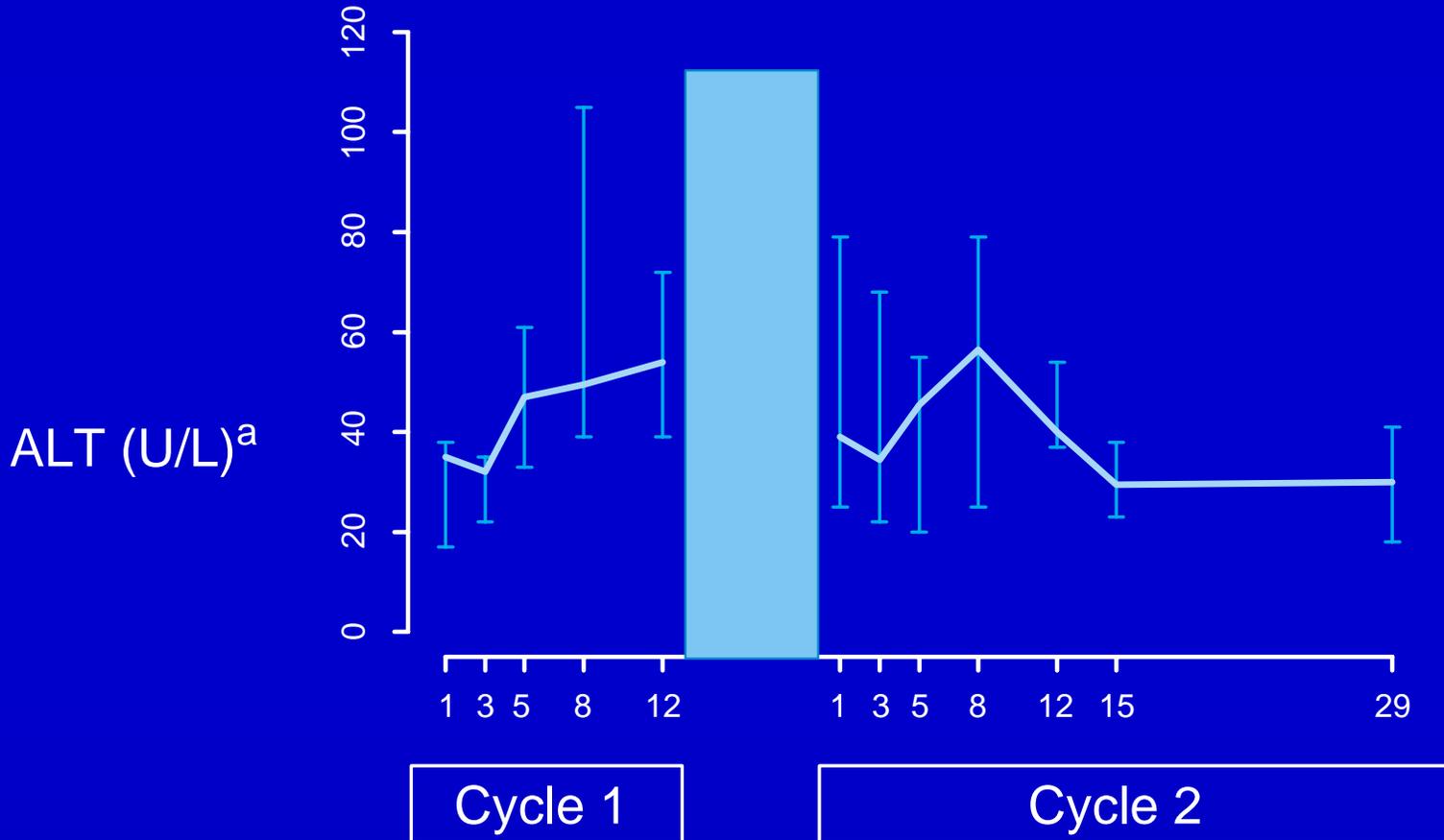
	3 (n = 3)	10 (n = 3)	30 (n = 6)	50 (n = 1)	100 (n = 2)	Total (n = 15)
<b>Fatigue</b>	2	2	6	1	2	13
<b>Pyrexia</b>	1	2	6	1	1	11
<b>Arthralgia</b>	2	2	5	0	1	10
<b>Chills</b>	2	2	3	1	2	10
<b>Headache</b>	2	2	4	0	1	9
<b>Myalgia</b>	0	2	4	1	2	9
<b>Rash</b>	0	1	5	1	2	9
<b>Constipation</b>	0	1	4	1	1	7
<b>Nausea</b>	1	0	3	1	2	7
<b>Edema Peripheral</b>	2	1	3	1	0	7
<b>Anorexia</b>	0	0	3	1	2	6
<b>Insomnia</b>	1	1	3	0	1	6

## Grade 3 Laboratory Toxicities through 2 Cycles by Dose ( $\mu\text{g}/\text{kg}$ )

- 7 of 9 patients at doses  $\geq 30 \mu\text{g}/\text{kg}$  experienced Grade 3 toxicity
- One patient at  $100 \mu\text{g}/\text{kg}$  experienced transient Grade 4 lymphopenia

	$\leq 10$ (n = 6)	30 (n = 6)	50 (n = 1)	100 (n = 2)	Total (n = 15)
Lymphopenia	0	2	1	2	5
Hypophosphatemia	0	1	0	1	2
Increased ALT	0	1	0	0	1
Hyperbilirubinemia	0	0	0	1	1
Thrombocytopenia	0	0	0	1	1
Leukocytosis	0	0	0	1	1
Neutropenia	0	0	1	0	1
Hyponatremia	0	0	0	1	1

# Median ALT Over Time for 30 µg/kg



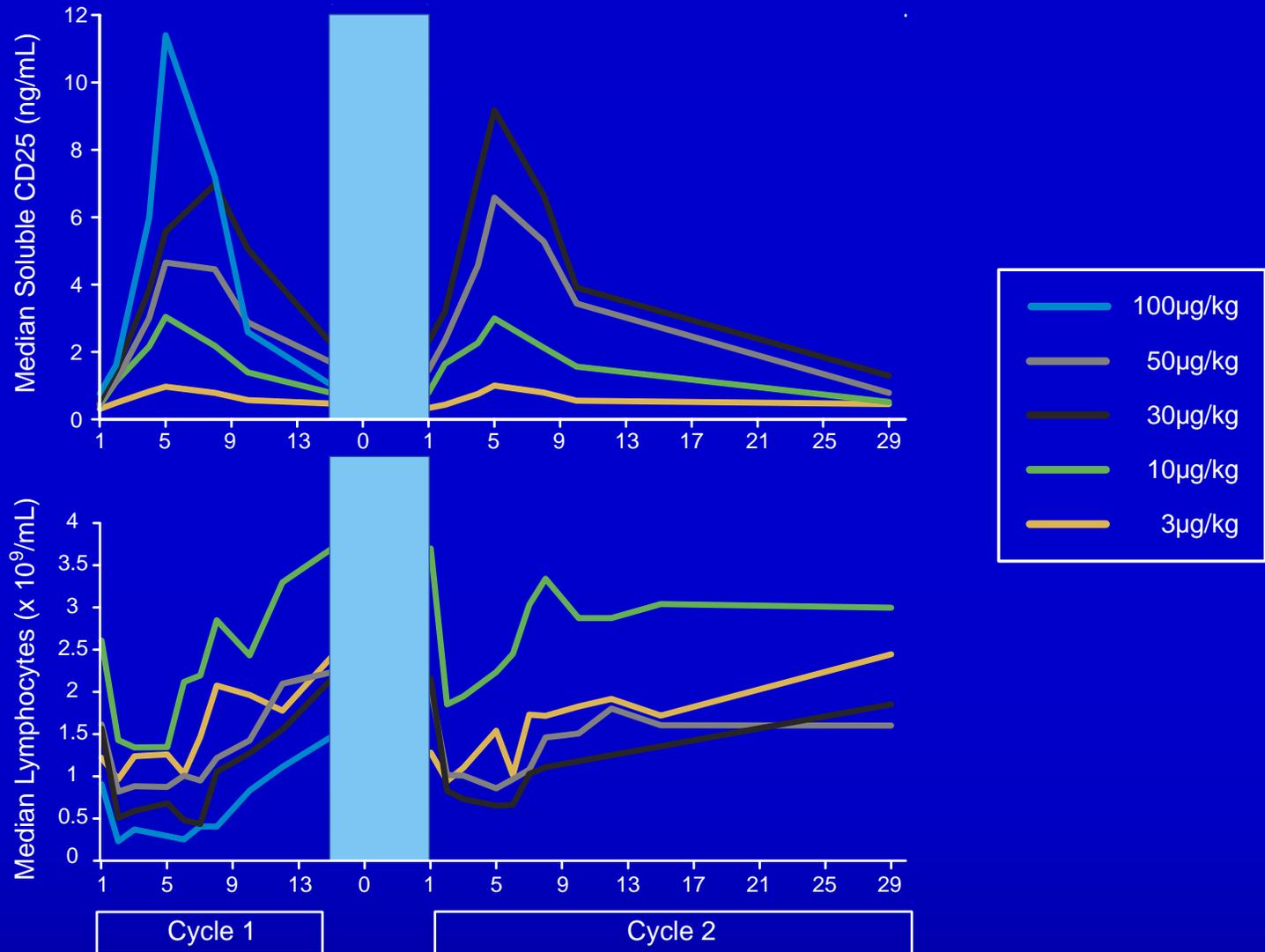
<sup>a</sup> median with IQR

# IL-21 Pharmacokinetics

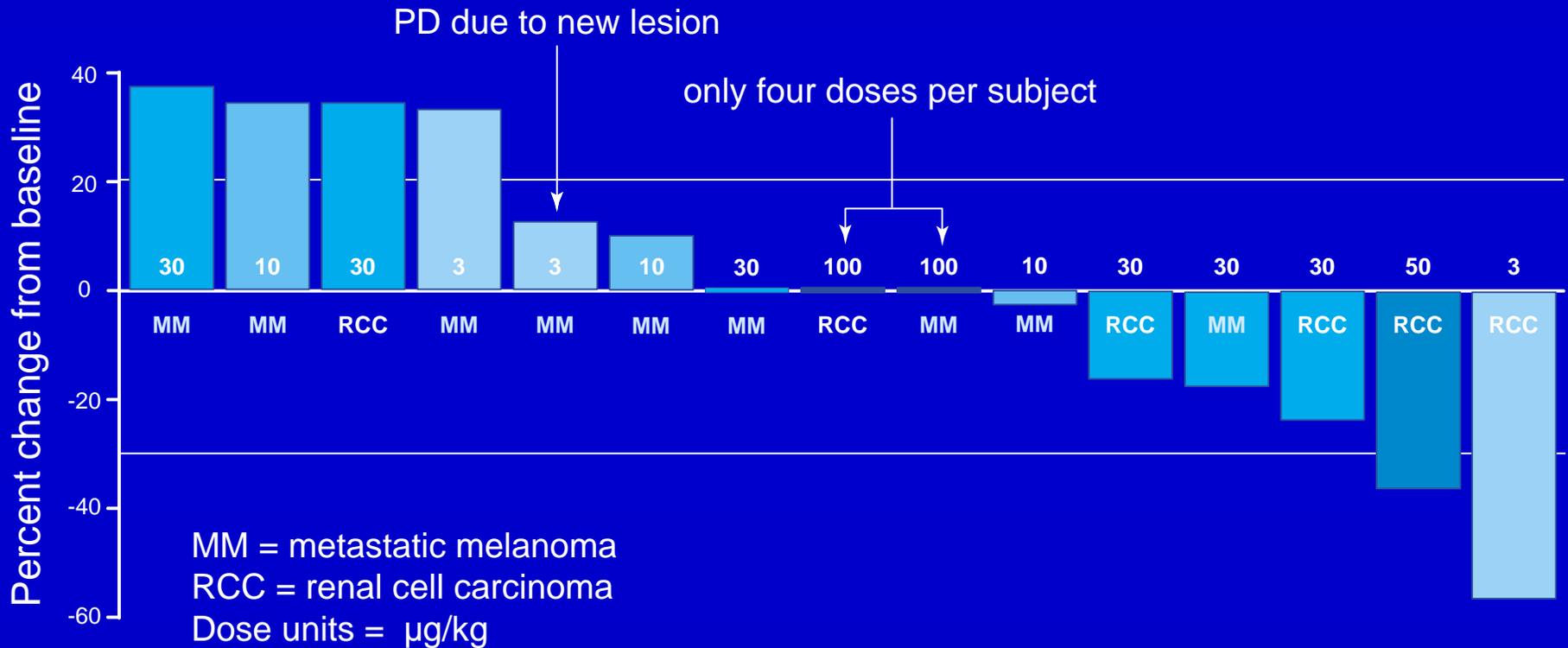
The half-life ( $t_{1/2}$ ) of IL-21 was approximately 1.5 hours

Dose ( $\mu\text{g}/\text{kg}$ )	N	Median (CV%)		
		C <sub>max</sub> (ng/mL)	AUC <sub>INF</sub> (hr*ng/mL)	$t_{1/2}$ (hr)
3	3	39.7 (70.8)	22.9 (37.3)	1.88 (13.4)
10	3	33.5 (80.0)	68.2 (14.5)	1.31 (15.5)
30	6	107 (115)	206 (41.6)	1.69 (11.8)
50	1	102 (--)	195 (--)	1.40 (--)
100	2	347 (48.0)	602 (41.3)	1.89 (2.63)

# Median Lymphocytes and Median Soluble CD25



# Changes in Target Lesion Diameter after Receiving 2 Cycles of IL-21 Treatment



# RECIST Responses through 2 Cycles by Dose ( $\mu\text{g}/\text{kg}$ )

	<b>3</b> (n = 3)	<b>10</b> (n = 3)	<b>30</b> (n = 6)	<b>50</b> (n = 1)	<b>100<sup>a</sup></b> (n = 2)
PR	1 (RCC)	0	0	1 (RCC)	0
SD	0	2 (MM)	2 (MM) 2 (RCC)	0	1 (RCC) 1 (MM)
PD	2 (MM)	1 (MM)	1 (RCC) 1 (MM)	0	0

a Each patient at 100  $\mu\text{g}/\text{kg}$  received only 4 of 10 planned doses

MM = metastatic melanoma

RCC = renal cell carcinoma

# Conclusions

- Outpatient MTD selected for further study in Part b:
  - 2 cycles of 30  $\mu\text{g}/\text{kg}/\text{day}$  x 5 days with 9-day rest interval
  - Reasonably well-tolerated by 6 patients
- AUC of IL-21 increased in dose-proportional manner
- Dose-related biological effects as measured by sCD25 and lymphocytes
- Objective evidence of anti-tumor activity

# Plans

- Completing enrollment of 30 patients treated at 30  $\mu\text{g}/\text{kg}/\text{day}$ 
  - 15 renal cell carcinoma
  - 15 metastatic melanoma
- Goals
  - Further characterize safety of this outpatient regimen
  - Estimate overall response rate for each cancer
  - Plan Phase 2 studies

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# Maximum ALT by Patient

