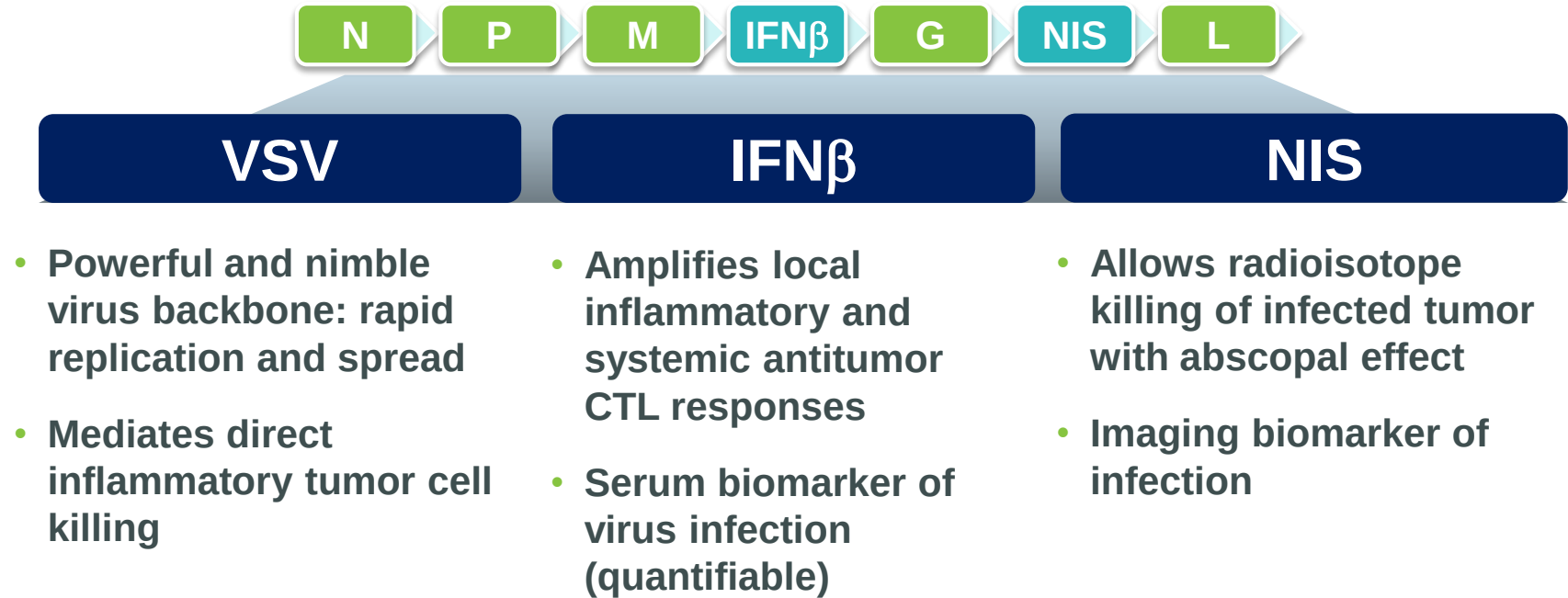


Intratumoral (IT) injection of a novel oncolytic virus, Voyager-V1 (VV1): completed phase I monotherapy in patients (pts) with refractory solid tumors

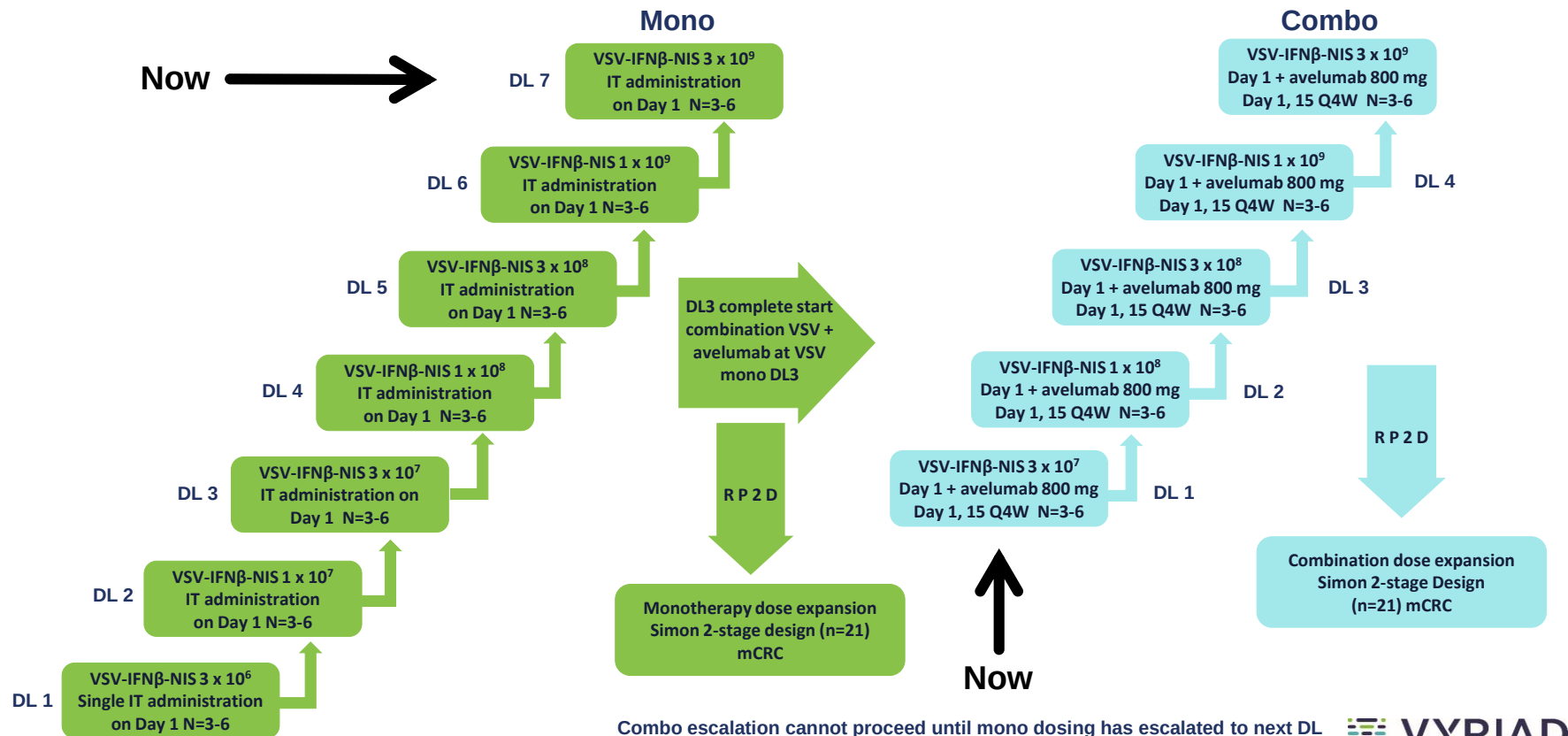
S. Powell¹, J. Merchan², M. Patel³, T. Cripe⁴, J. Strauss⁵, M. Old⁶, R. Diaz⁷, K.W. Peng⁷, A. Bexon⁷, S. Russell⁷

1 Sanford Cancer Center, Sioux Falls; 2 University of Miami; 3 University of Minnesota, Minneapolis;
4 Nationwide Children's Hospital, Columbus; 5 Mary Crowley Cancer Research, Dallas;
6 Ohio State University Comprehensive Cancer Center, Columbus; 7 Vyriad, Rochester, MN

Voyager-V1 (VSV-IFN β -NIS): Low seroprevalence, armed and trackable, designed to amplify antitumor immunity



Voyager-V1 intratumoral phase 1-2 study



Combo escalation cannot proceed until mono dosing has escalated to next DL

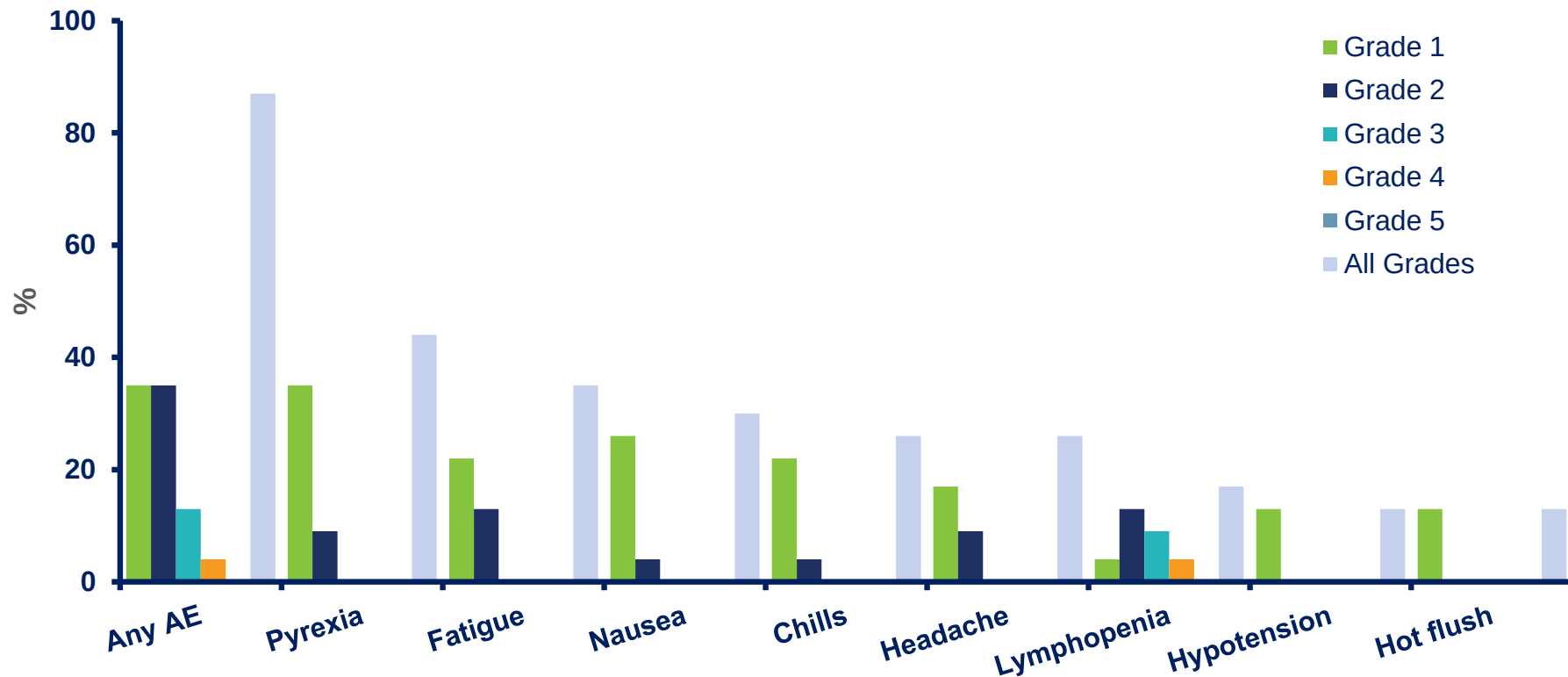
Summary of enrolled patients

	SPECT/CT Negative	SPECT/CT Positive
DL 6 1×10^9	Colon ● Liver* Cervix ● Psoas* Head & neck: sinus ● Lung	Colon ● Omentum left upper quadrant* Endometrium ● Pelvic soft tissue* Ovary ● Juxtapleural nodule (liver)**
DL 5 3×10^8	Pancreas ● Liver	Rectum ● Liver* Unknown ● Lymph node Head & neck: larynx ● Paraspinal musculature
DL 4 1×10^8	Colon ● Lung Head and neck ● Head	Esophagus ● Supraclavicular nodes Mesothelioma ● Chest
DL 3 3×10^7	Breast ● Right supraclavicular fossa Breast ● Chest wall	Colon ● Adrenal Pancreas ● Chest
DL 2 1×10^7	Colon ● Lung Head & neck: tongue ● Lung	Pancreas ● Abdominal wall**
DL 1 3×10^6	Head & neck: oropharynx ● Lung Head & neck: hypopharynx ● Subcutaneous tissue Rectal ● Lung	

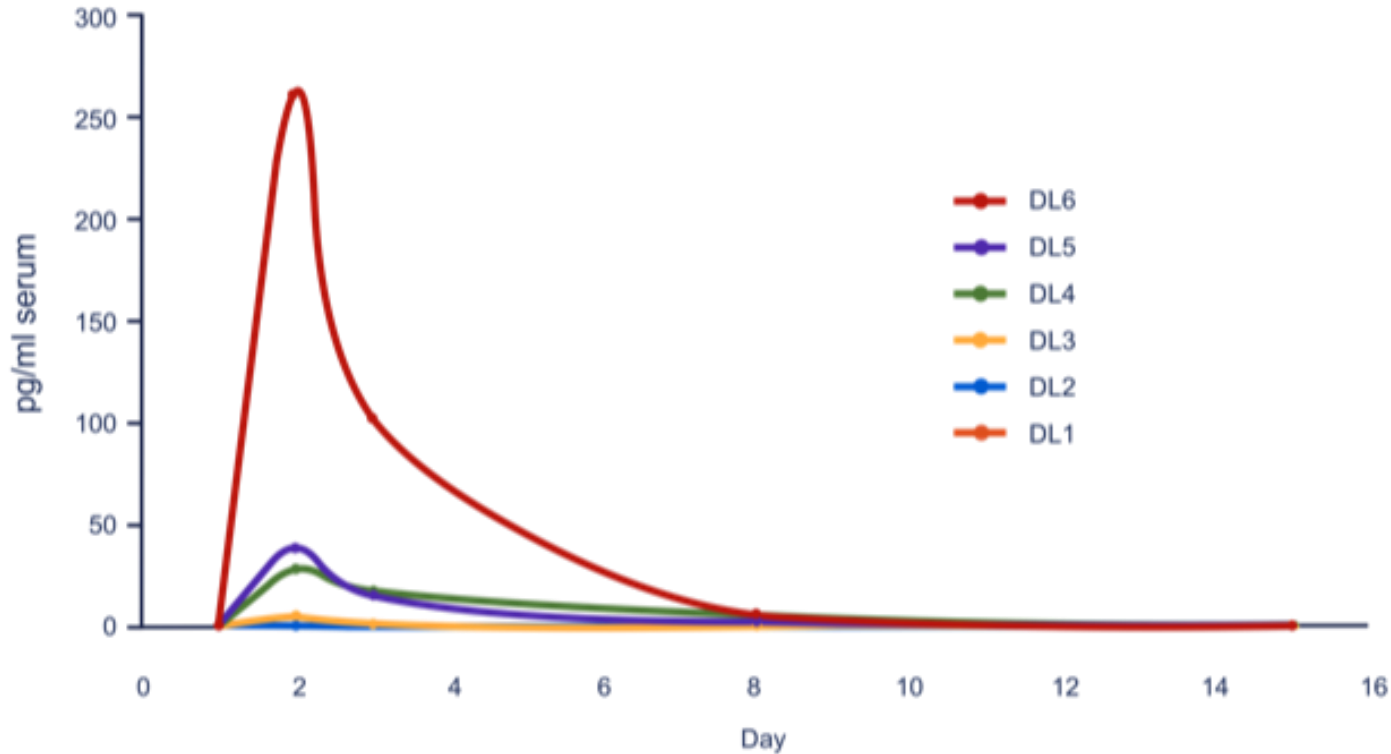
*Local read only: central read not yet done; ** SPECT/CT not done

Cancer type ● Injected lesion

Well tolerated: related AEs CTCAE >10% by grade



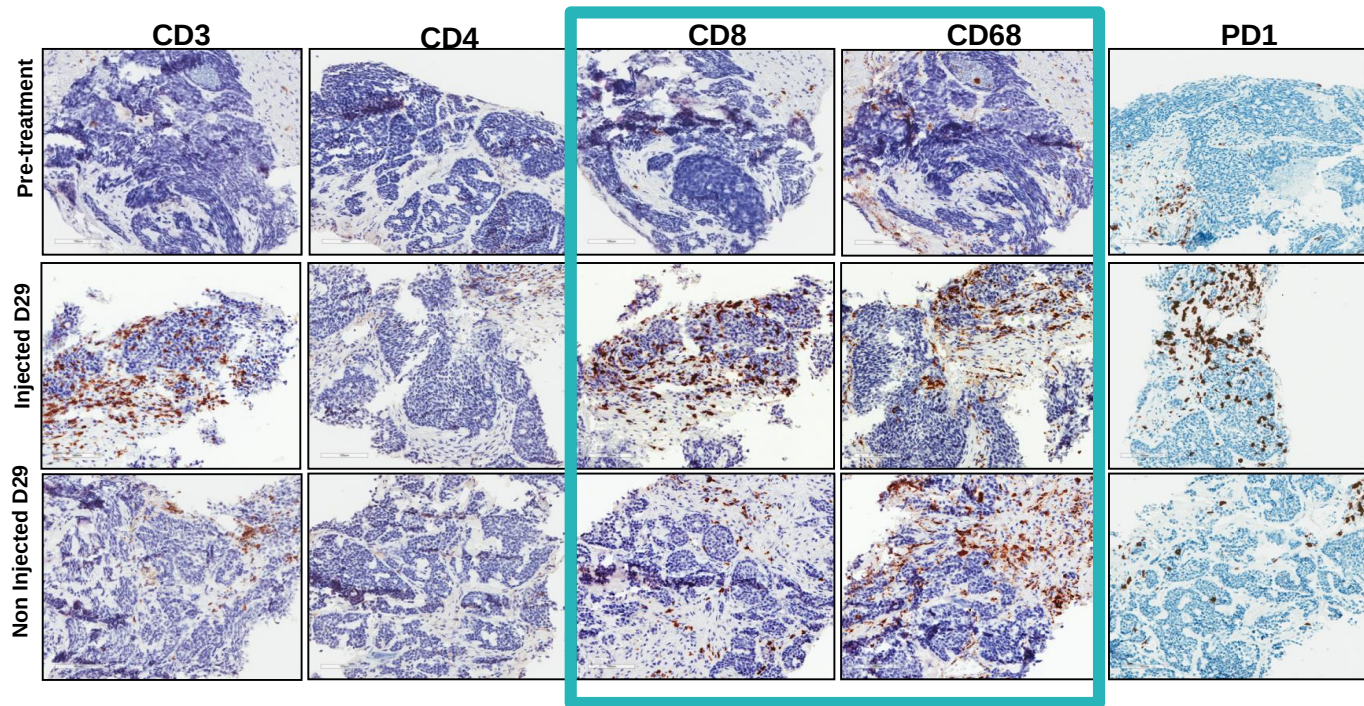
Serum IFN β shows dose-response relationship



- DL5 and DL6 are averages of the first 3 patients

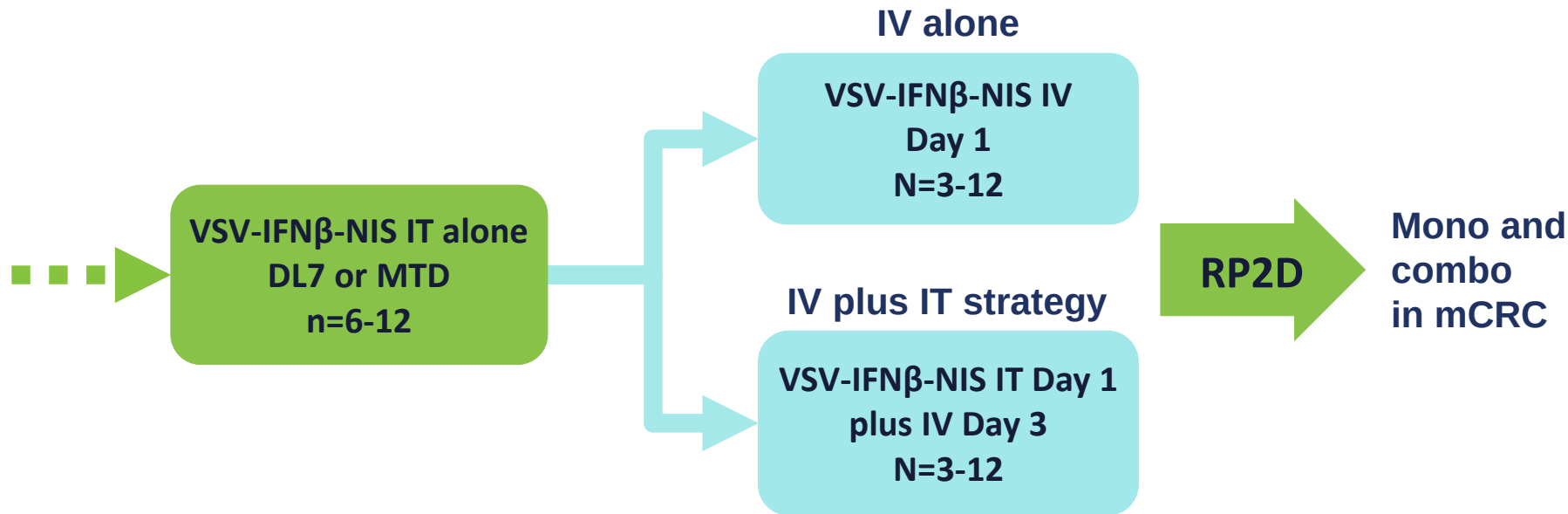
T-cell infiltration seen in non-injected lesions, day 29 post therapy

SCCHN Oropharynx Patient
102-001 (DL1)



- Evidence of intratumoral inflammation in 75% patients tested

Next steps – monotherapy optimization, combination with avelumab



Intermediate dose levels as necessary
Recommended regimen based on
serum IFN β , efficacy, PD and safety