## **SITC** 2017

Ő

November 8-12 NATIONAL HARBOR MARYLAND

Gaylord National Hotel & Convention Center



SITC

#### First-in-human study with intratumoral administration of a CD40 agonistic antibody: Preliminary results with ADC-1013/JNJ-64457107 in advanced solid malignancies

Peter Ellmark, PhD, Assoc. Prof., Principal Scientist



#SITC2017

## **Presenter Disclosure Information**

#### Peter Ellmark

The following relationships exist related to this presentation:

I am employed by Alligator Bioscience and hold stocks and stock options in Alligator Bioscience



#SITC2017



#### **Presentation Slides**

This presentation regarding Alligator Bioscience AB ("Alligator") and its contents are confidential and may not be reproduced, redistributed or passed on, directly or indirectly, to any other person or published, in whole or in part, by any medium or for any purpose.

This presentation does not constitute or form part of any offer or invitation to purchase or subscribe for, or any offer to underwrite or otherwise acquire any shares in Alligator or any other securities. Neither shall the presentation or any part of it, nor the fact of its distribution or communication, form the basis of, or be relied on in connection with, any contract, commitment or investment decision in relation thereto.

This presentation contains forward-looking statements, which are subject to risks and uncertainties because they relate to expectations, beliefs, projections, future plans and strategies, anticipated events or trends and similar expressions concerning matters that are not historical facts. Such forward-looking statements involve known and unknown risks, uncertainties and other factors, which may cause the actual results, performance or achievements of Alligator or the industry in which it operates, to be materially different than any future results, performance or achievements expressed or implied by such forward-looking statements. Given these risks, uncertainties and other factors, recipients of this presentation are cautioned not to place undue reliance on these forward-looking statements. The forward-looking statements referred to above speak only as at the date of the presentation. Alligator will not undertake any obligation to release publicly any revisions or updates to these forward-looking statements to reflect future events, circumstances, anticipated events, new information or otherwise except as required by law or by any appropriate regulatory authority.

This presentation speaks as of November 2017. The information included in this presentation may be subject to updating, completion, revision and amendment and such information may change materially. No person, including Alligator and its advisors, is under any obligation to update or keep current the information contained in this presentation and any opinions expressed in relation thereto are subject to change without notice. Neither Alligator nor any of its owners, affiliates, advisors or representatives (jointly the "Disclosers") make any guarantee, representation or warranty, express or implied, as to the accuracy, completeness or fairness of the information and opinions contained in this presentation, and no reliance should be placed on such information. None of the Disclosers accept any responsibility or liability whatsoever for any loss howsoever arising from any use of this presentation or its contents or otherwise arising in connection therewith.

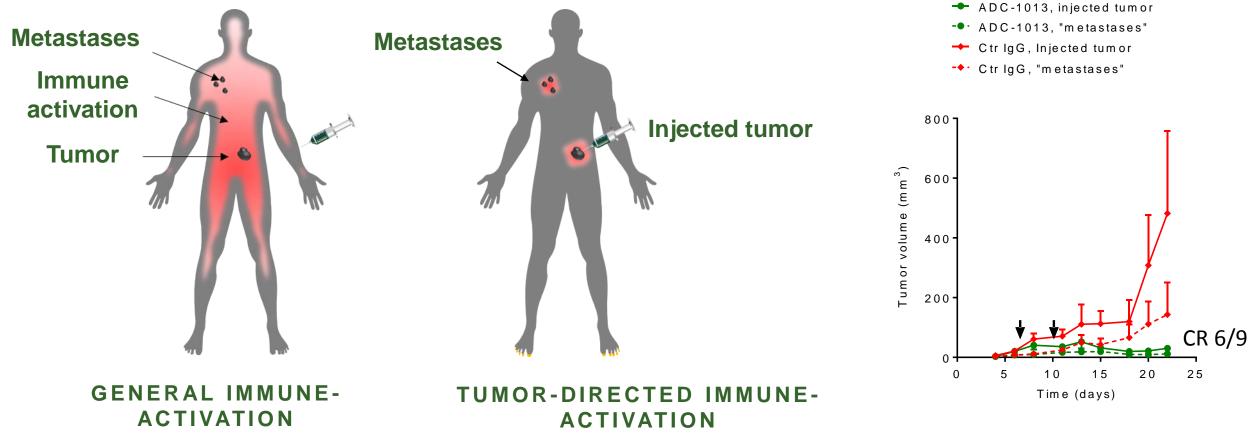
This presentation is subject to Swedish law and any dispute arising in respect of this presentation is subject to the exclusive jurisdiction of the Swedish courts.

By attending this presentation or by accepting any copy of this document, you agree to be bound by the foregoing limitations.



### **Tumor-directed immuno-oncology**

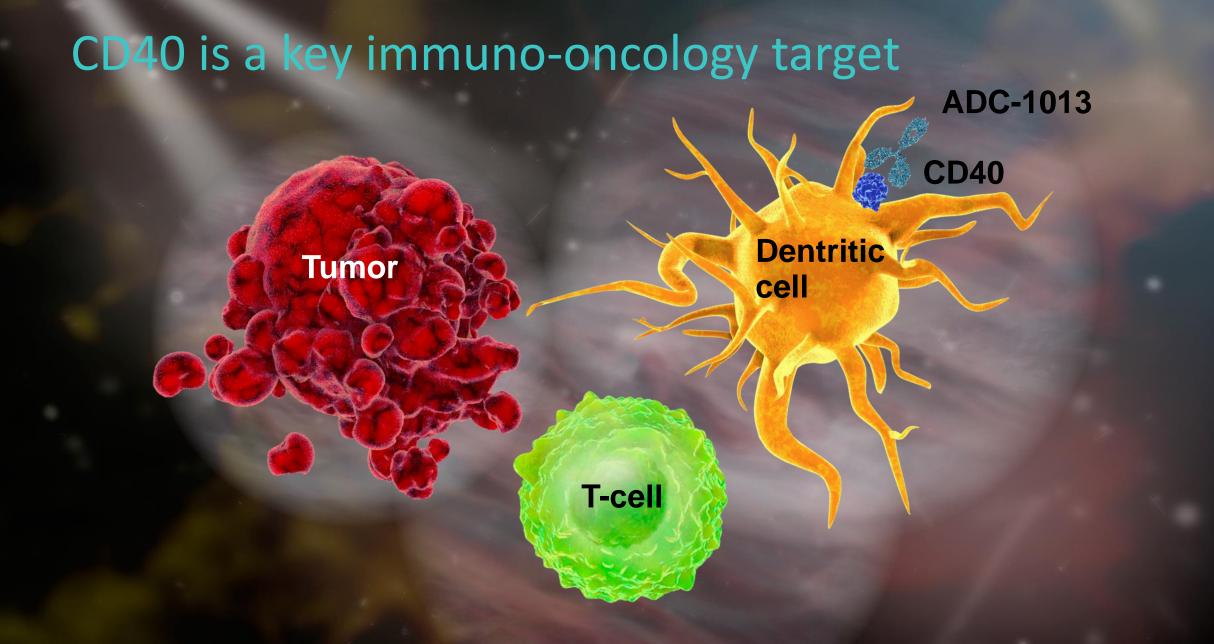
#### Supported by pre-clinical data:



Adapted from Ellmark et al 2016, CII

Adapted from Mangsbo et al 2015, CCR







### First-in-human clinical phase 1 (NCT02379741)

- Study therapy: ADC-1013 intratumoral (or IV) every 14 days
- Study design: ADC-1013 dose escalation in subjects with advanced stage solid tumors to evaluate safety and tolerability
- Status:
  - 1st patient dosed April, 2015
  - Five clinical centers in Sweden, Denmark and UK
  - Study completed, 24 subjects enrolled

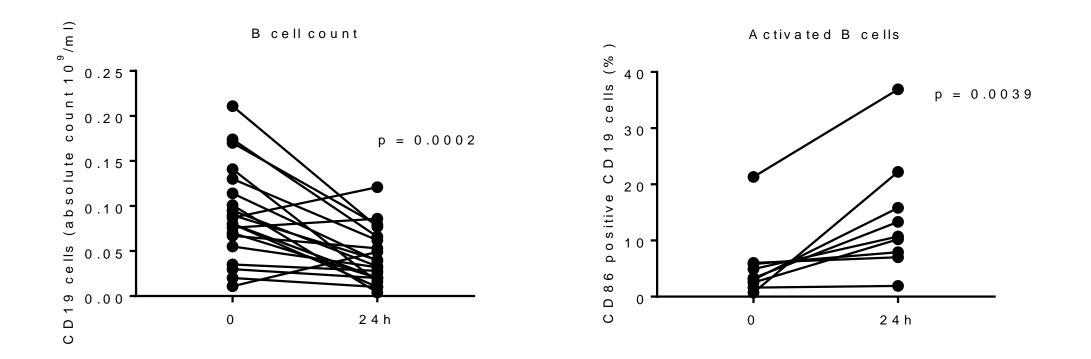


### Demographics

Administration route	In	IV			
Dose level (µg/kg)	22.5	75	200	400	75
Number of patients dosed	3	4	3	8	5
Age median (years)	67.0	62.5	74.0	59.0	60.0
Sex: Male/Female	3/0	2/2	2/1	3/5	4/1
Tumor type					
Colon/Rectal cancer		1	3	3	2
Melanoma	1			1	
Kidney	2			2	
Bile duct				1	1
Breast				1	
Ovarian		1			
Lung Cancer		2			
Peritoneal Cancer					1
Oesophageal Cancer					1



## ADC-1013 mediates CD40 agonistic responses in advanced stage cancer patients





#### Treatment related adverse events ≥ grade 3 - majority of adverse events were grade 1 and 2 and transient

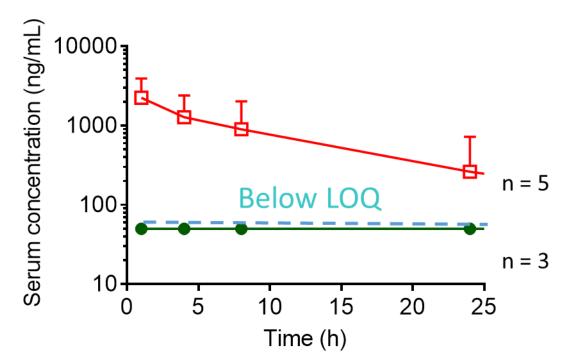
Drug-related adverse	Pat ID	Dose level	Grade	Dose limiting
events ≥ grade 3		(µg/kg)		toxicity
Chills	009	200	3	No
Hypotension	011	400	3	No
Cholecystitis	014	400	3	Yes
Shiverings	016*	400	3	No
Abdominal pain	016	400	3	Yes

\* At two occasions



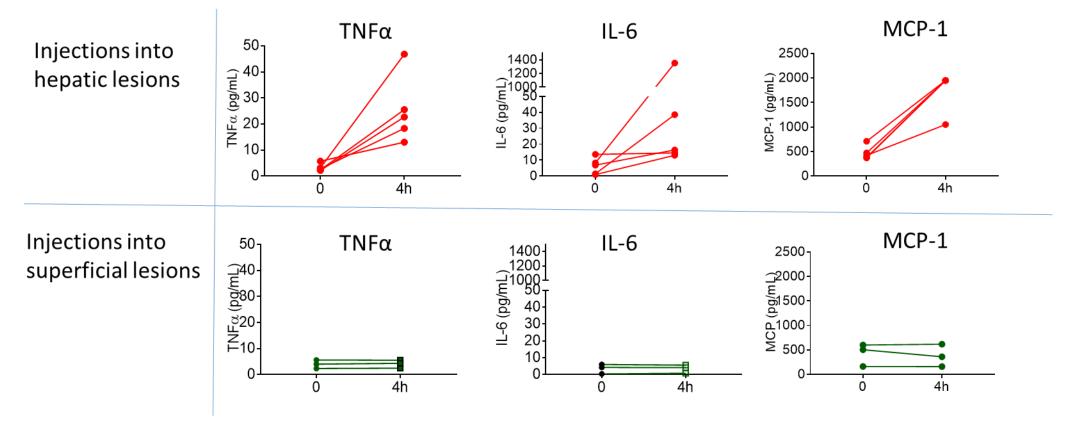
#### Serum concentration of ADC-1013 (400 μg/kg dose) - low systemic exposure following injections into superficial lesions

- Hepatic lesions, Intratumoral administration
- Superficial lesions, Intratumoral administration





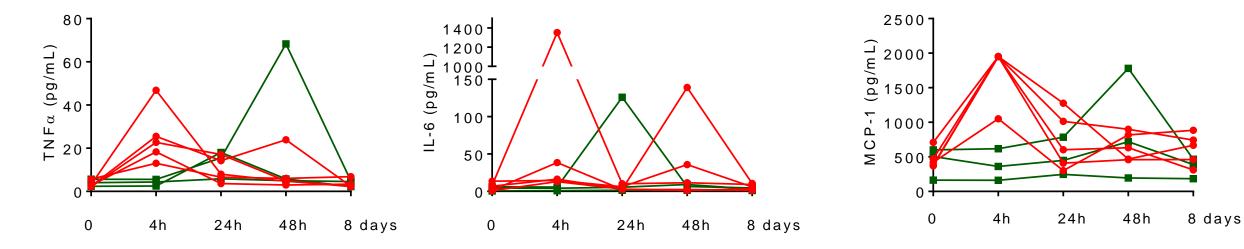
# Early cytokine release only detected following hepatic injection of ADC-1013 (400 µg/kg dose level)





# ADC-1013-mediated cytokine release over time following the first dose (400 $\mu$ g/kg dose level)

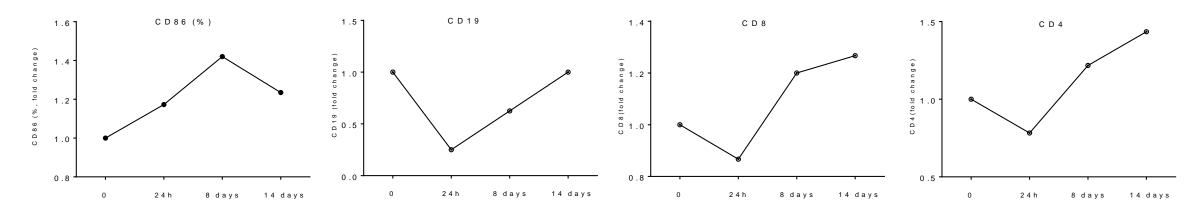
- Cytokine levels following injection into Hepatic lesions
- Cytokine levels following injection into Superficial lesions





#### Tumor effects – case study (Patient ID 015)

- Best response in study: Stable disease (12 months on study)
- Male 57 year, metastatic kidney cancer
- 7 treatment cycles: 400 μg/kg, 600 μg/kg and 900 μg/kg, no severe AE
- Indication of pharmacodynamic responses, including B cell activation





#### Lessons and Take Home Messages

- ADC-1013 induces CD40-mediated pharmacodynamics effects
- Injection into superficial lesions results in low systemic exposure, but with indications of systemic pharmacodynamic responses
- Intratumoral administration is well tolerated in superficial lesions at least up to 400  $\mu$ g/kg (MTD 200  $\mu$ g/kg in hepatic lesions)



#### Current development, Janssen Phase 1 study (NCT02829099)

- Study Therapy: JNJ-64457107 (ADC-1013) IV every 14 days (75 μg/kg starting dose)
- Study design:
  - <u>Part 1</u>: JNJ-64457107 (ADC-1013) dose escalation in subjects with advanced stage solid tumors
  - <u>Part 2</u>: JNJ-64457107 (ADC-1013) dose expansion: NSCLC, pancreatic cancer, and cutaneous melanoma.
- Status:
  - 1<sup>st</sup> patient dosed on October 26, 2016
  - Currently 52 subjects enrolled



#### Acknowledgements

Investigators Dorte Nielsen Gustav Ullenhag Jeffrey Yachnin David Palmer Yuk Ting Ma

#### **Alligator Bioscience**

Camilla Wennersten

Per Norlén

Adnan Deronic

Niina Veitonmäki

Anneli Nilsson

Scientific advisors Jeffrey Weber Thomas Tötterman Sara Mangsbo

Janssen

**Participating patients** 

#### Meet us at Poster: O24



## Serum concentration of ADC-1013 (400 µg/kg dose) - low systemic exposure following injections into superficial lesions

- Hepatic lesions, Intratumoral administration
- Superficial lesions, Intratumoral administration

