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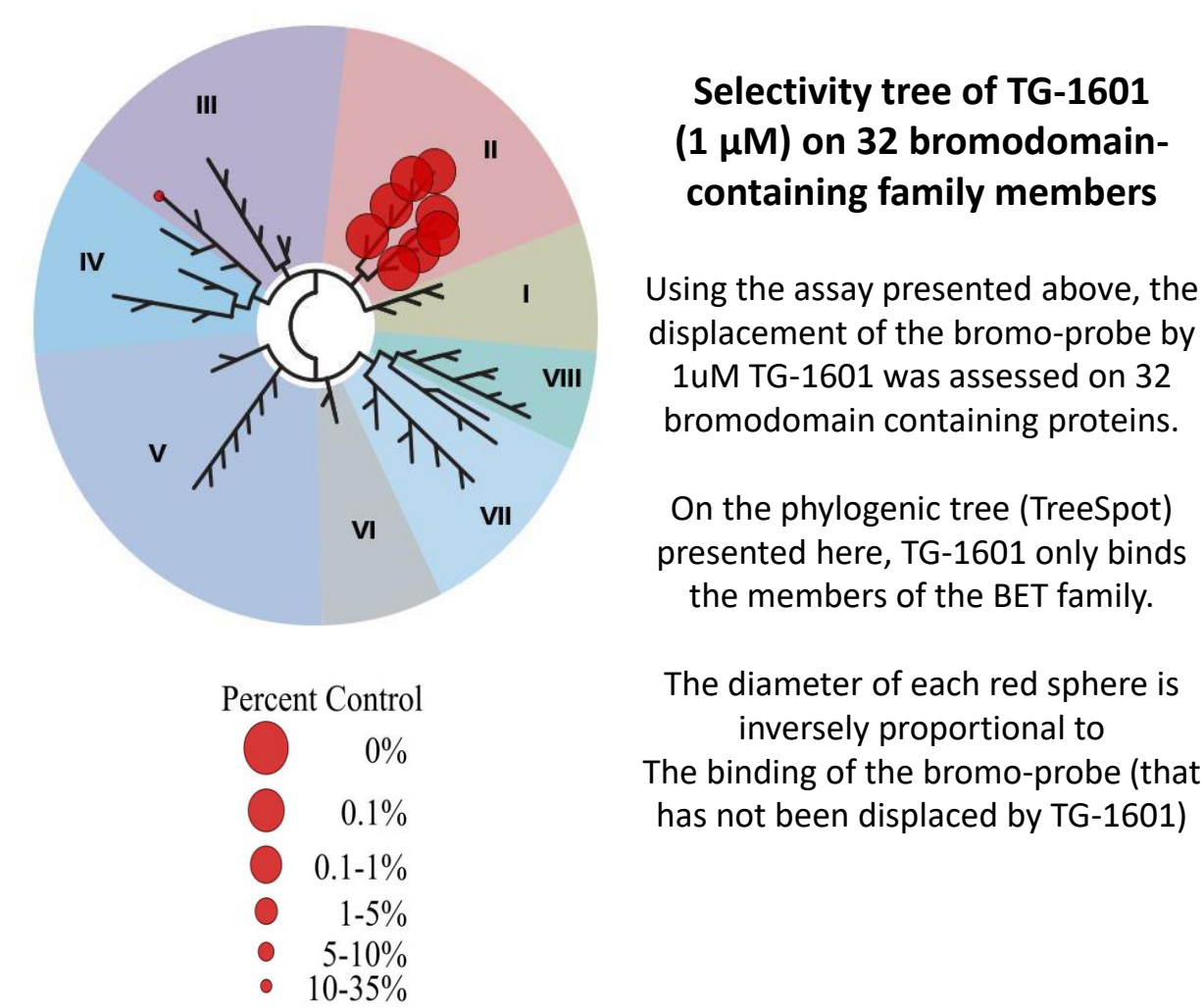
## Background

- BET (bromodomain and extra-terminal) proteins bind to acetylated lysine residues on chromatin and participate in the regulation of gene transcription. Inhibition of BET protein binding to chromatin with small molecules selectively suppresses the transcription of a set of oncogenes, including MYC and BCL-2.
- TG-1601 (aka CK-103) is a novel, selective and potent small molecule inhibitor of BET bromodomains. TG-1601 binds to the first and second bromodomains (BD1, BD2) of the BET protein family, BRD2, BRD3, BRD4, and BRDT, with Kd values ranging from 0.5 nM to 9.1 nM. MYC protein expression is strongly inhibited in the MV4-11 cancer cell line with an EC50 of 5 nM, with GI50 comprised between 15 nM and 85 nM in a variety of leukemia and myeloma cancer cell lines, indicating potent inhibition of cell proliferation.
- Time course and dose-response studies conducted in mice bearing subcutaneous MV4-11 xenografts showed that MYC protein was undetectable 3 hours following a single 25 mg/kg oral dose, with a TG-1601 tumor concentration of 5 μM achieved. Interestingly, at 24h post-dose, while TG-1601 is cleared from the tumor, MYC protein level remains below 40% of its initial level, indicating a long-lasting effect pharmacodynamic of TG-1601, potentially attributable to enhanced binding affinity compared to earlier generation molecules.
- In agreement with this long-lasting effect, efficacy studies in MV4-11 tumor-bearing mice, dosed with a 20 mg/kg/day PO regimen interrupted by increasing drug holiday periods, showed that drug holidays of 2, 3 and 4 days per week only modestly affected efficacy (3%, 15% and 12% TGI respectively), suggesting discontinuous dosing of TG-1601 in clinic may not significantly impact efficacy.

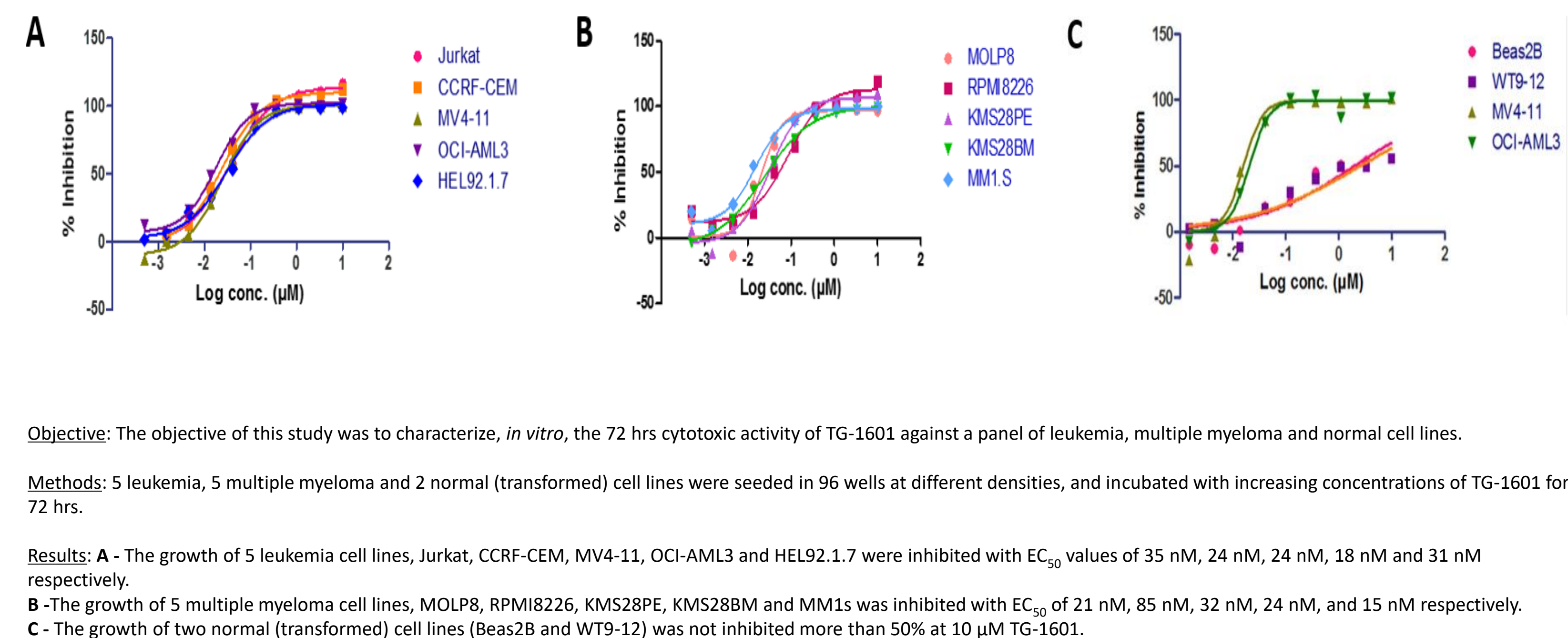
**Kd (nM)**  
TG-1601 and two related BET inhibitors

bromodomain	TG-1601	JQ1	OTX-015
BRD2(BD1)	8.2	57	20
BRD2(BD2)	0.65	35	3
BRD3(BD1)	4	32	12
BRD3(BD2)	0.46	38	2
BRD4(BD1)	1.1	31	13
BRD4(BD2)	0.81	29	4.9
BRDT(BD1)	9.1	120	28
BRDT(BD2)	2.2	51	10
CREBBP	640	>3000	>3000
EP300	660	>3000	>3000

Binding constants were assessed using the BROMOscan platform from Discover. The assay includes trace bromodomain concentrations (<0.1 nM) and thereby report true thermodynamic inhibitor Kd values.

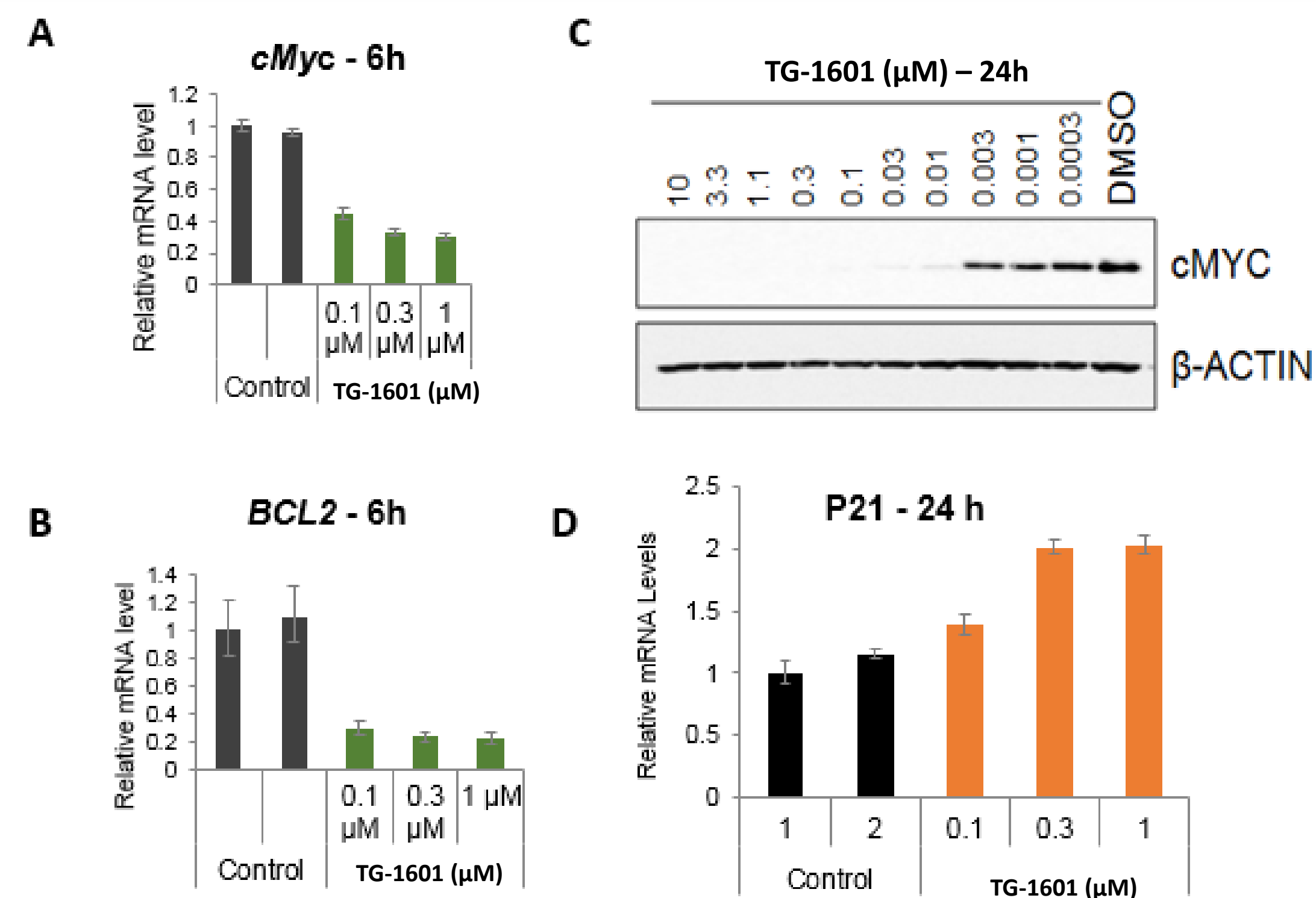


## In vitro cytotoxic activity

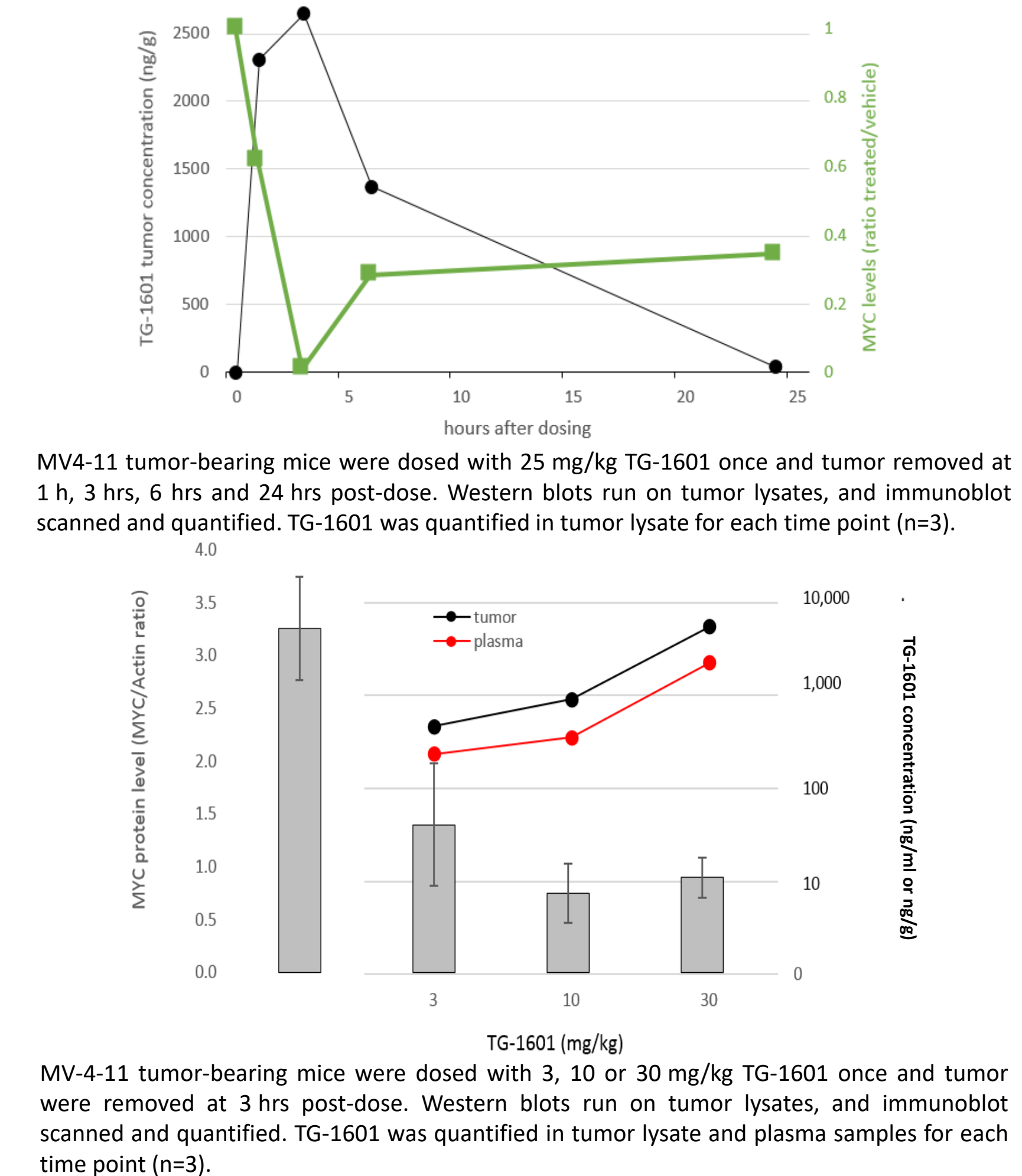


## In vitro and in vivo Pharmacodynamic activity

### In vitro pharmacodynamic activity of TG-1601

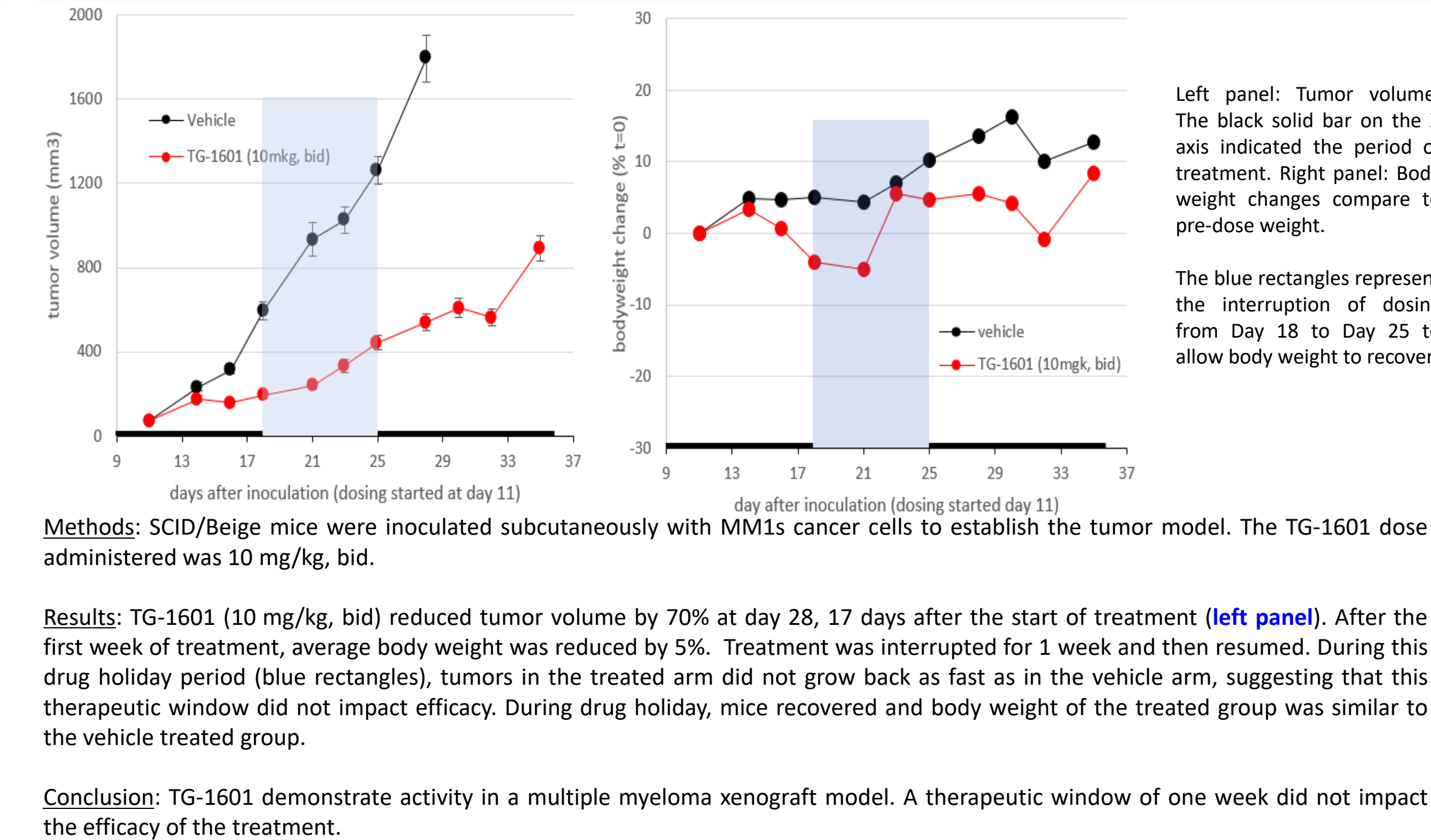


### In vivo pharmacodynamic activity of TG-1601

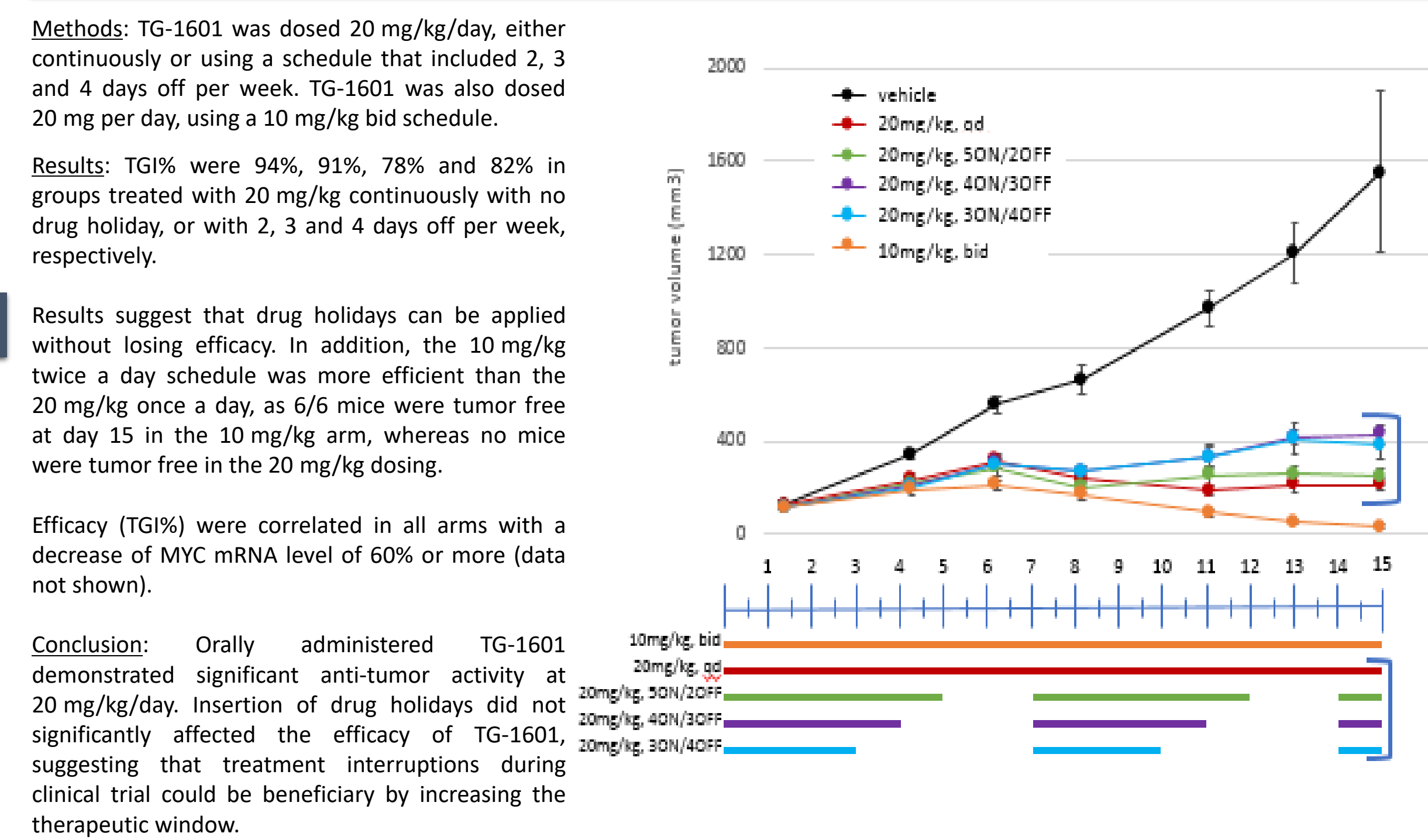


## In vivo anti-tumor activity

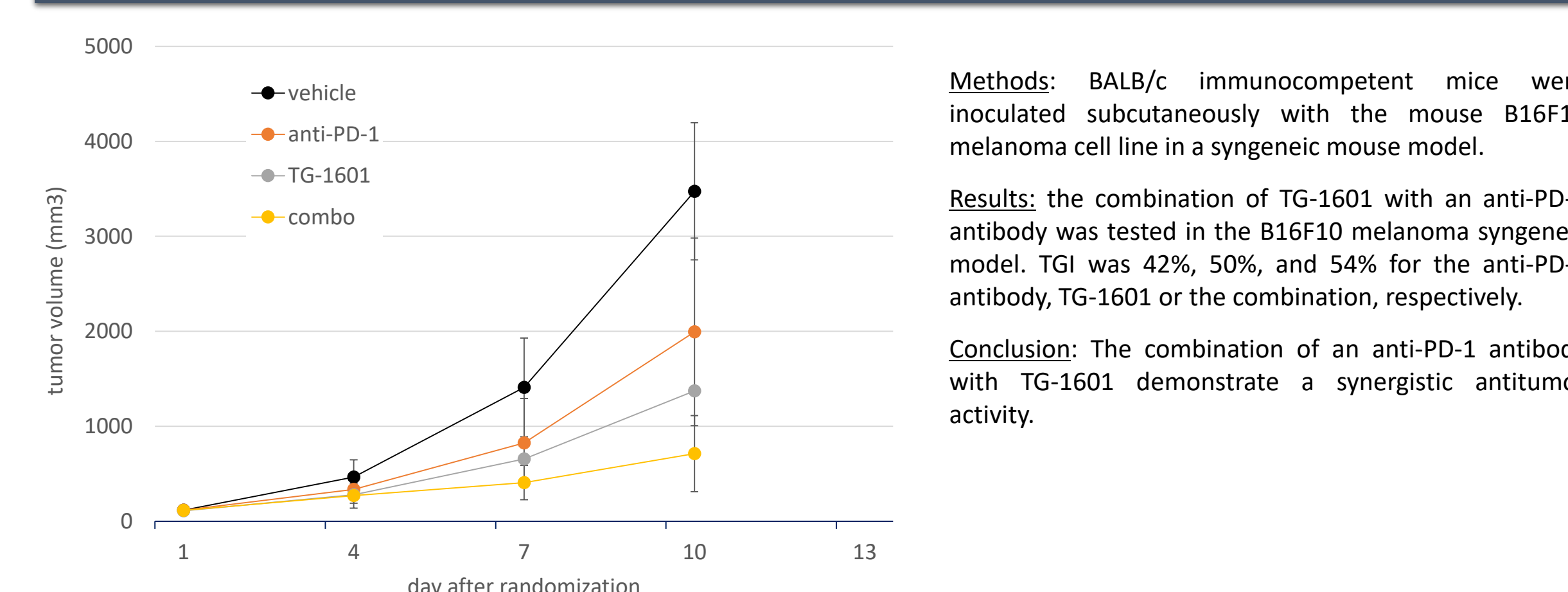
### In vivo anti-tumor activity in MM1s multiple myeloma model



### In vivo anti-tumor activity in MV4-11 AML model

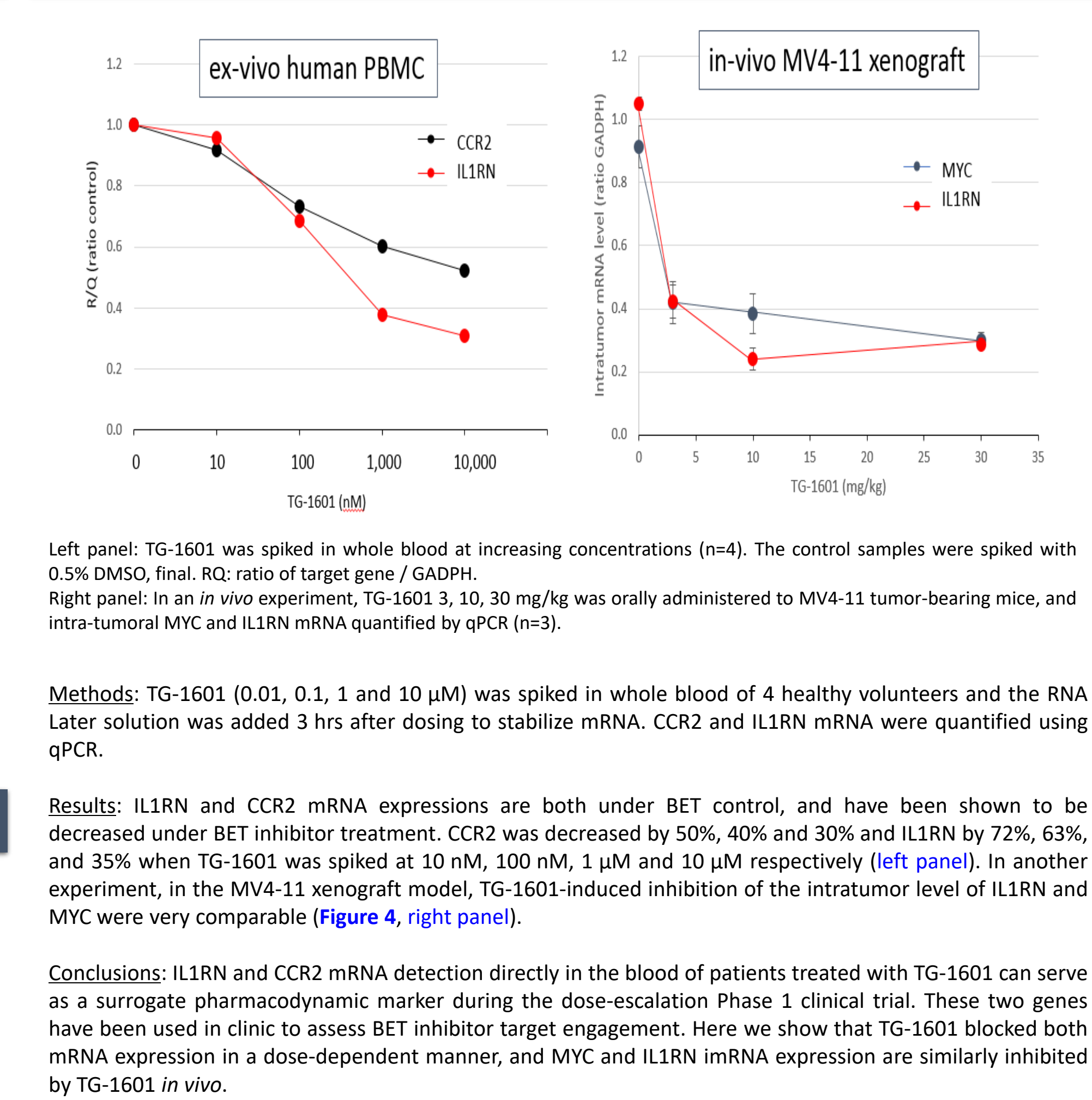


### In vivo anti-tumor activity in combination with anti-PD-1 antibody (B16 syngeneic model)



## Pharmacodynamic markers

### In vivo and ex-vivo validation of CCR2 and IL1RN



## Conclusions

- TG-1601 is a novel and potent BET inhibitor that specifically inhibits the binding of the BET sub-family of bromodomain-containing protein family
- TG-1601 potently inhibits cell growth of various multiple myeloma and lymphoma cell lines *in vitro*, but does not affect the growth of normal (transformed) cell lines.
- TG-1601 inhibits MYC expression:
  - In vitro*, TG-1601 potently inhibit Myc expression at the RNA and protein levels
  - In vivo*, TG-1601 totally inhibits Myc protein expression at 3h post dose. Interestingly the level of c-Myc did not come back to its original levels at 24 hrs, even though TG-1601 was barely detectable in the tumor. This may suggest a long-lasting effect of the drug in this model.
- In different *in vivo* xenograft models, TG-1601 potently inhibits tumor growth and drug holidays do not alter its anti-tumor activity that treatment interruptions during clinical trials could be beneficiary by increasing the therapeutic window.
- TG-1601 showed combinatorial effects in an *in vivo* model with anti-PD-1 antibodies. Clinical trials will be focused on a potential synergism between TG-1601 and other drugs in the TG pipeline (e.g. anti-PDL-1, BTK inhibitor, anti-CD20 antibody (ublituximab) or PI3K inhibitor (umbralisib).
- As an important part of the phase 1 dose-escalation, surrogate markers (e.g. CCR2 and IL1RN mRNA levels) will be tested to define the Pharmacologically Active Dose.