

# A Phase 1 Clinical Trial of NLG802, a Prodrug of Indoximod With Enhanced Pharmacokinetic Properties

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## INTRODUCTION

- Indoximod contributes to enhanced antitumor immunity by relieving indoleamine 2,3-dioxygenase (IDO)-mediated immunosuppression by mechanisms that involve modulation of aryl hydrocarbon receptor (AhR) signaling and mTOR activation, leading to multiple immunomodulatory effects, including a shift from suppressive Foxp3<sup>+</sup> Treg toward Th17 helper T cells and downregulation of IDO expression in dendritic cells<sup>1</sup>
- Indoximod demonstrated an excellent safety profile in human clinical trials at doses of up to 1200 mg BID
- Increasing doses above 1200 mg BID generally does not result in increased plasma concentration or drug exposure due to limiting dose-dependent oral bioavailability
- To improve bioavailability of indoximod, we developed NLG802, a prodrug that increases oral bioavailability of indoximod ~5-fold in nonhuman primates<sup>2</sup>

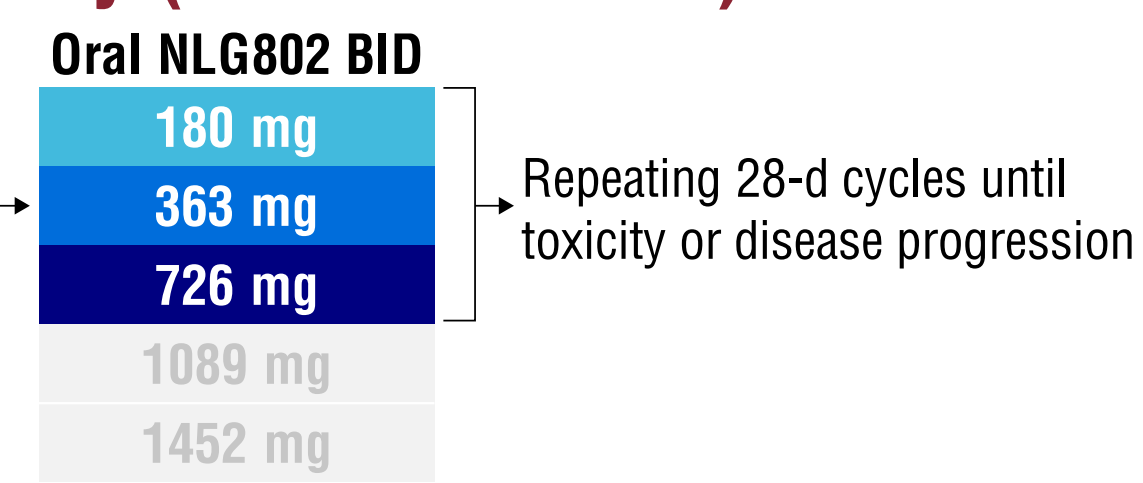
## OBJECTIVES

- To assess safety and toxicity of NLG802
- To determine maximum tolerated dose (MTD) or maximum biologically achievable dose (MBAD) and recommended Phase 2 dose of NLG802
- To assess the pharmacokinetics (PK) of NLG802 and its active metabolite indoximod at increasing dose levels

## METHODS

### Phase 1 3+3 Dose Escalation Study (NCT03164603)

- Adults (≥18 y) with recurrent advanced solid tumors refractory to previous chemotherapy or biological agents
- Eastern Cooperative Oncology Group performance status 0 or 1
  - Adequate bone marrow, renal, and liver function
  - No active/recent history of autoimmune disease, untreated brain metastases, active infection/serious uncontrolled medical disorder, or pregnancy
- PK assessments were performed at Day 1 after first single dose (0–72 h) and at Day 21 (0–12 h) after repeated BID (q12h) dosing



## RESULTS

### Baseline Demographics

	Total N=11	NLG802 180 mg BID n=3	NLG802 363 mg BID n=4	NLG802 726 mg BID n=4
Median age, y (range)	63 (41–81)	41 (41–64)	69 (55–77)	69 (46–81)
Female, n (%)	4 (45)	2 (67)	2 (50)	1 (25)
Caucasian/white, n (%)	11 (100)	3 (100)	4 (100)	4 (100)
Tumor type, n (%)				
Colorectal	3 (27)	1 (33)	1 (25)	1 (25)
Bladder	1 (9)	1 (33)	0	0
Cervical	1 (9)	1 (33)	0	0
Pancreas	3 (27)	0	2 (50)	1 (25)
Melanoma	1 (9)	0	1 (25)	0
Sarcoma	1 (9)	0	0	1 (25)
Lung	1 (9)	0	0	1 (25)

- NLG802 has been administered at 3 of 5 dose levels in 11 subjects

### Safety and Tolerability

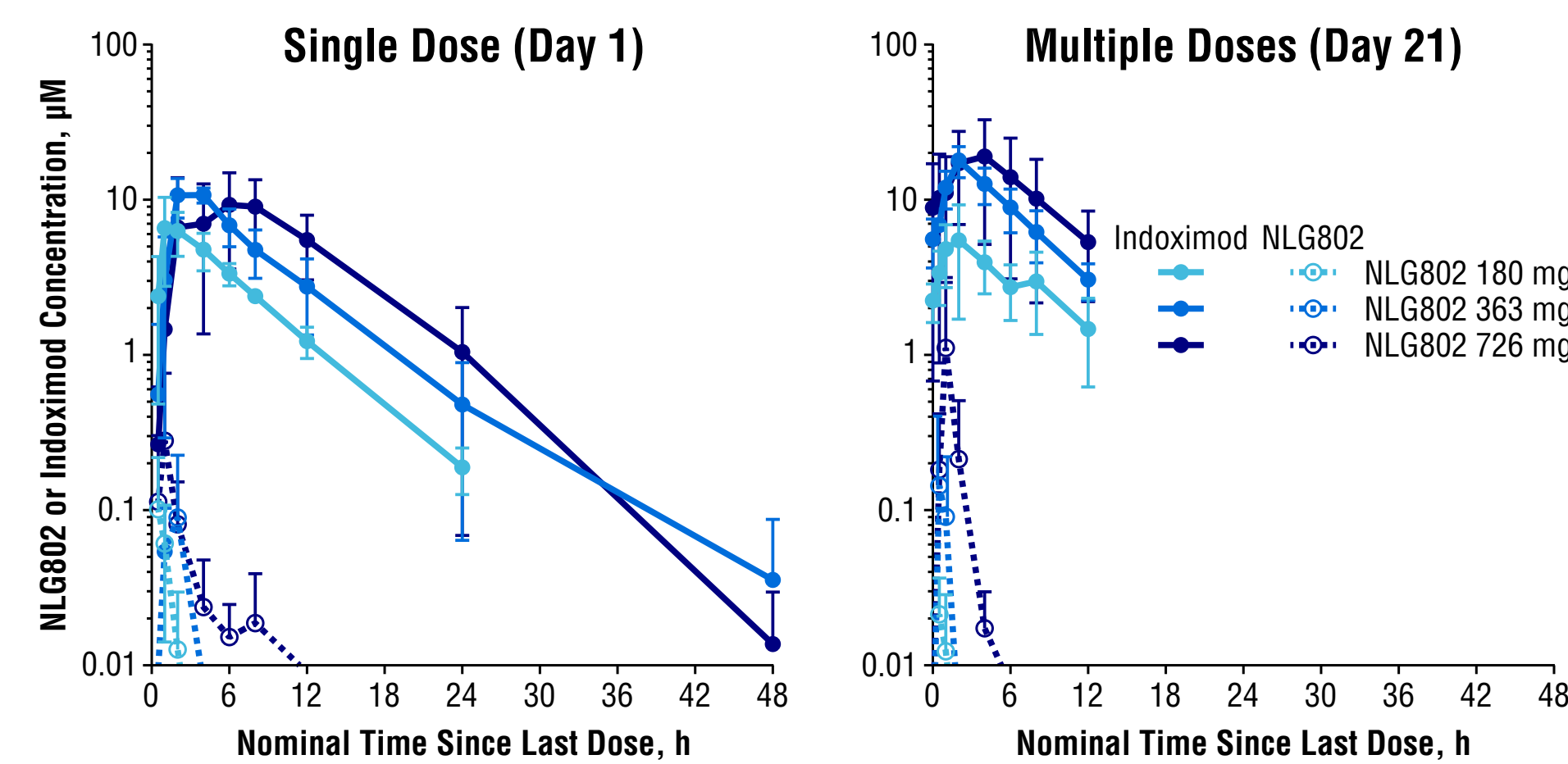
	Total N=11	NLG802 180 mg BID n=3	NLG802 363 mg BID n=4	NLG802 726 mg BID n=4
<b>AEs in &gt;2 subjects</b>				
Fatigue	6	1	3	2
Nausea	5	3	1	1
Peripheral edema	4	2	2	
<b>Subjects with Grade 3 AEs (all unrelated to NLG802), n</b>	4	2	1	1
Type of event*		Abdominal distention, constipation, hypokalemia, back pain, abdominal pain, anemia, ascites, hypophosphatemia, localized edema, edema peripheral, esophagitis	Hypokalemia	Muscular weakness
<b>Subjects with NLG802-related AEs (all Grade 1 or 2), n<sup>†</sup></b>	6	1	2	3
Type of event*		↑ LDH, fatigue, ↓ lymphocyte count, nausea	Fatigue, nausea, rash	Abdominal discomfort, ↓ blood Mg, fatigue (2 events), nausea, vomiting

\*1 report of each event unless otherwise indicated; <sup>†</sup>No Grade ≥3 events occurred. AEs, adverse events; LDH, lactate dehydrogenase.

- No subject experienced any dose-limiting toxicities or AEs Grade >3
- There were no NLG802-related AEs leading to discontinuation or serious NLG802-related AEs

## Pharmacokinetics

### Time-Dependent Mean Plasma Concentration of NLG802 or Indoximod After Oral Dose(s) of NLG802

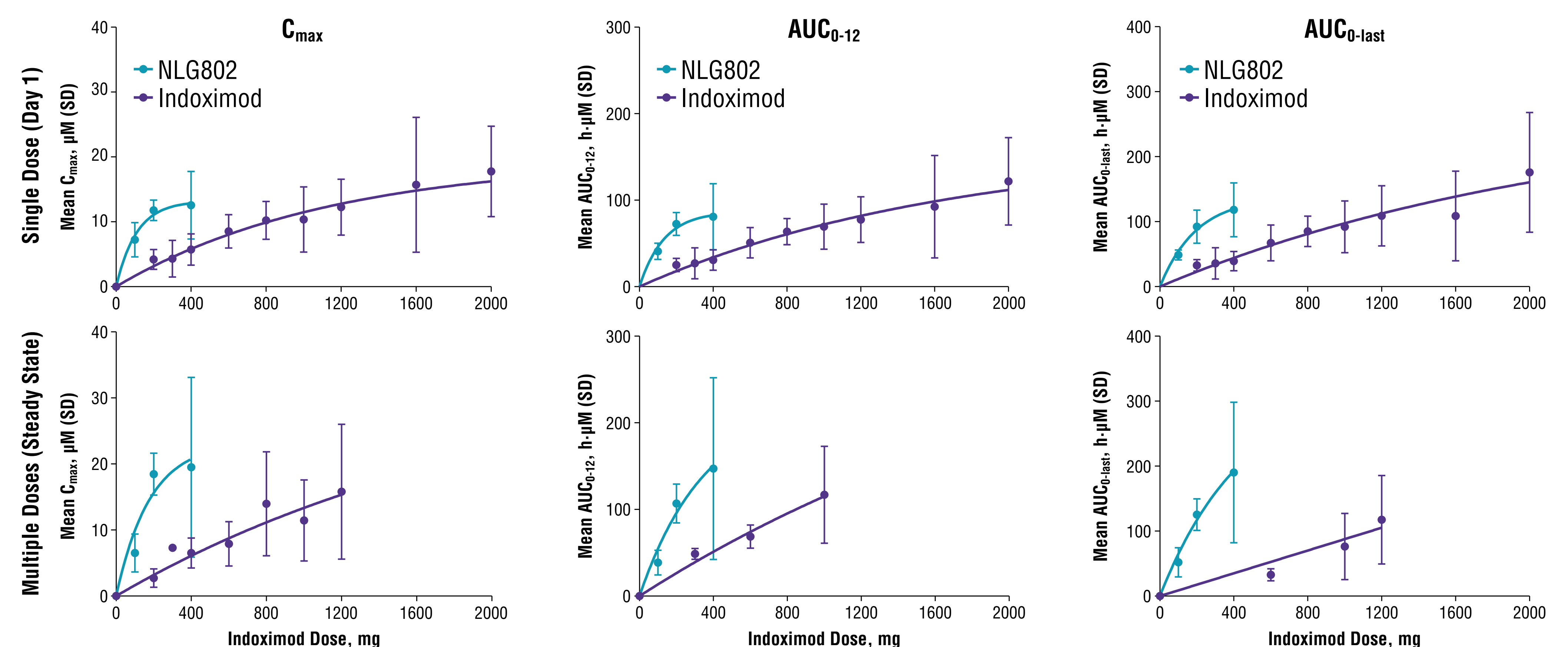


### PK Parameters for Indoximod after Single (Day 1) or Multiple (Day 21) NLG802 Doses

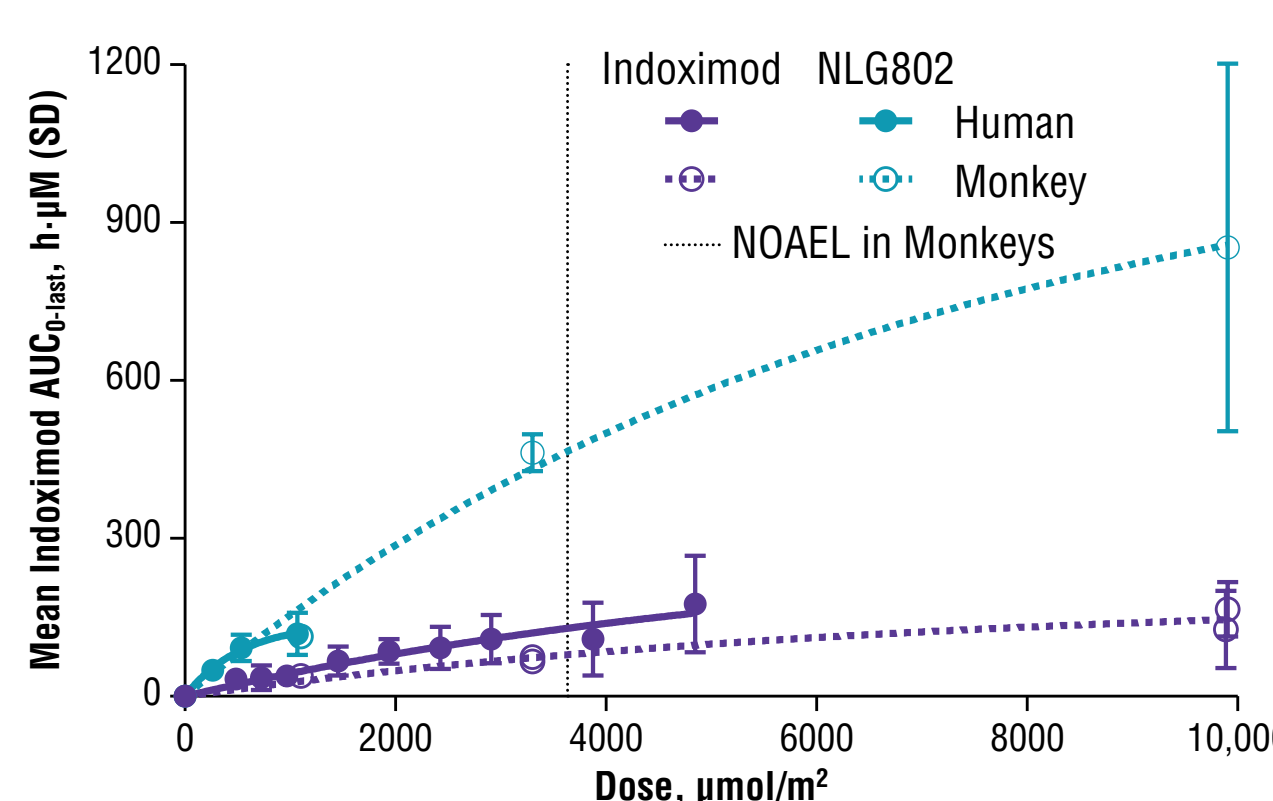
Indoximod Molar Equivalent Dose	NLG802 180 mg: n=3		NLG802 363 mg: n=4		NLG802 726 mg: n=4	
	100 mg	200 mg	200 mg	400 mg	400 mg	400 mg
	Day 1	Day 21	Day 1	Day 21	Day 1	Day 21*
C <sub>max</sub> , µM	7.2 (2.7)	6.5 (2.9)	11.8 (1.6)	18.5 (3.2)	12.5 (5.2)	19.5 (13.6)
T <sub>max</sub> , h	1.3 (0.6)	2.2 (1.8)	2.5 (1.0)	2.5 (1.0)	7.0 (4.2)	3.3 (1.2)
T <sub>1/2</sub> , h	4.4 (0.7)	5.6 (1.7)	4.7 (1.9)	4.1 (1.2)	4.4 (1.0)	6.0 (4.2)
AUC <sub>0-12</sub> , h·µM	40.9 (9.4)	38.7 (14.2)	72.6 (13.3)	106.9 (22.4)	80.7 (38.3)	147.1 (104.9)
AUC <sub>0-inf</sub> , h·µM	48.8 (7.6)	52.1 (22.6)	92.2 (25.5)	125.5 (24.4)	118.1 (41.5)	190.2 (108.3)
CL/F, L/h	17.2 (2.6)	19.0 (11.0)	19.2 (6.6)	13.5 (2.5)	30.4 (8.4)	21.0 (9.3)
V/F, L	110.0 (34.0)	137.0 (29.0)	120.0 (24.0)	79.0 (23.0)	192.9 (68.4)	190.3 (164.6)

\*1 subject did not complete dose-limiting toxicity window due to rapid disease progression. Values are given as mean (standard deviation (SD)). AUC<sub>0-12</sub>, area under concentration-time curve from time 0 to 12 h; AUC<sub>0-inf</sub>, AUC from time 0 to infinity; C<sub>max</sub>, maximum concentration; CL/F, oral clearance; T<sub>max</sub>, time to C<sub>max</sub>; t<sub>1/2</sub>, half life; V/F, apparent volume of distribution.

### Indoximod Exposure Parameters After Single or Repeated Molar-Equivalent Oral Doses of Indoximod or NLG802



### Indoximod Exposure in Monkeys and Humans After Single Oral Dose of NLG802 or Indoximod at Allometrically Scaled Molar-Equivalent Doses



NOEL, no-observed-AE level.

### Maximum Tolerated Dose or Maximum Biologically Achievable Dose

- NLG802 MTD/MBAD had not been reached at time of analysis
  - 1 subject (726 mg dose) did not complete dose-limiting toxicity window due to rapid disease progression and was replaced

### Antitumor Activity at Time of Analysis

- 2 subjects achieved a best response of stable disease per RECIST 1.1 criteria, with 1 subject having durable stable disease >8 cycles
- 5 subjects (45%) remained on study, 5 (45%) were alive, and 1 unknown due to withdrawal (10%)

## CONCLUSIONS

- Overall, NLG802 was well tolerated, with no unexpected safety signals
- At the time of this analysis, MTD/MBAD had not been reached
- NLG802 produced 4-fold increases in C<sub>max</sub> and AUC after a single dose, and 4–5.5 fold increases in C<sub>max</sub> and AUC after continuous BID dosing compared with the molar equivalent of indoximod dosing
- Average accumulation ratios for indoximod after repeated NLG802 BID dosing were 1.2, 1.4, and 1.6 at doses of 180, 363, and 726 mg, respectively
- Daily exposure at steady state after NLG802 726 mg BID dosing was ~300 h·µM, which compared favorably to 240 h·µM obtained with indoximod 1200 mg BID
- Average steady-state plasma concentration after NLG802 726 mg BID dosing was 12.5 µM compared with ~10 µM for indoximod 1200 mg BID dose

REFERENCES 1. Brincks EL, et al. AACR 2018, poster 3753; 2. Mautino M, et al. AACR 2017, poster 4076.

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