

# Heat Shock Protein 90 (Hsp90) Inhibition as a Potential Novel Approach to the Treatment of Patients with ALK Mutated Non-small Cell Lung Cancer (NSCLC)

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# Disclosure

- **I am an employee of Infinity Pharmaceuticals**

# Heat Shock Protein 90 (Hsp90) is an Emerging Cancer Target

## Function of Hsp90

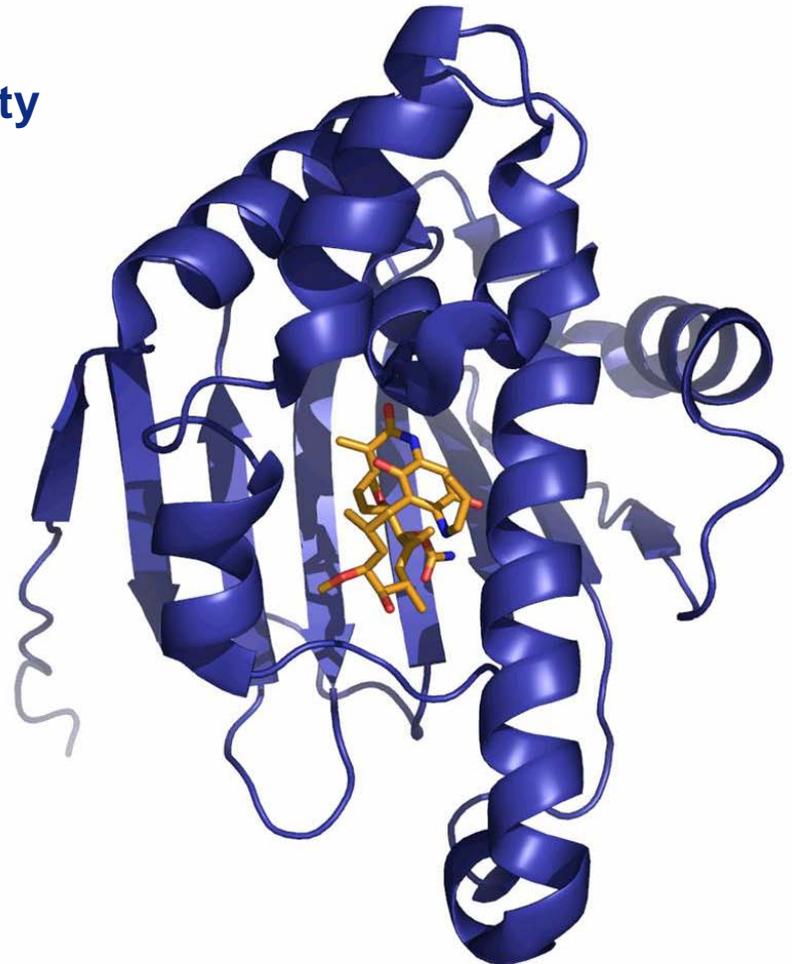
- “Chaperone” protein necessary for stability and function of certain “client” proteins

## Function of Hsp90 in Cancer Cells

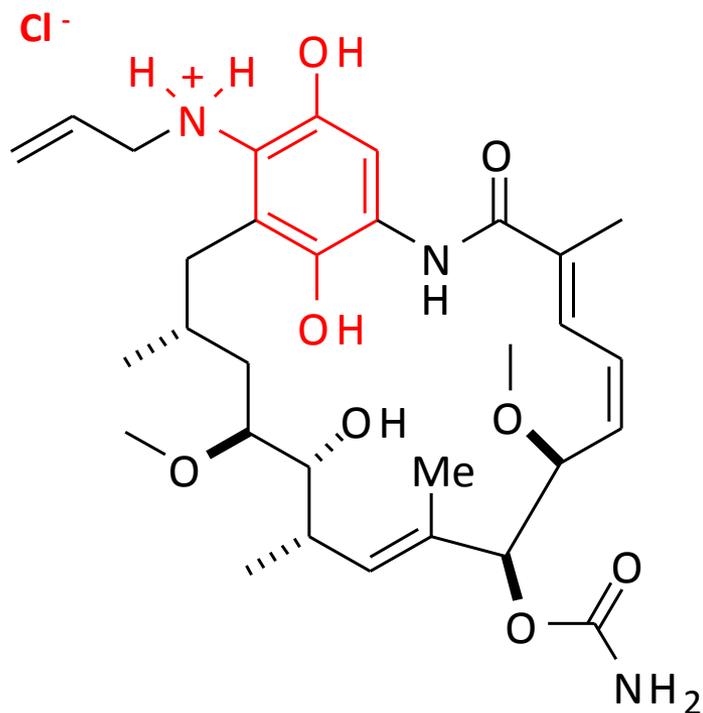
- Many oncoproteins are dependent on Hsp90 for function

## Therapeutic Rationale

- Inhibiting Hsp90 induces degradation of oncoproteins, provides an alternative to directly inhibiting these proteins



# IPI-504 (Retaspimycin Hydrochloride)



- Highly potent and selective Hsp90 inhibitor
- Novel analog of the natural product geldanamycin
- Water soluble IV formulation, administered to patients in normal saline
  - >250 mg / mL aqueous solubility
- Preclinical evidence of broad therapeutic potential
- Two ongoing clinical studies focused on patients with non-small cell lung cancer

## Activity of IPI-504, a Novel Heat-Shock Protein 90 Inhibitor, in Patients With Molecularly Defined Non-Small-Cell Lung Cancer

Lecia V. Sequist, Scott Gettinger, Neil N. Senzer, Renato G. Marrins, Pasi A. Jänne, Rogerio Lilenbaum, Jhanelle E. Gray, A. John Iafrate, Ryohei Kameyama, Nafessa Hafeez, Jennifer Sweeney, John R. Walker, Christian Fritz, Robert W. Ross, David Grayzel, Jeffrey A. Engelman, Darrell R. Berger, Guillermo Paez, and Ronald Natale

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[www.nature.com/onc](http://www.nature.com/onc)



### SHORT COMMUNICATION

## The Hsp90 inhibitor IPI-504 rapidly lowers EML4–ALK levels and induces tumor regression in ALK-driven NSCLC models

E Normant<sup>1</sup>, G Paez<sup>1</sup>, KA West, AR Lim, KL Slocum, C Tunkey, J McDougall, AA Wylie, K Robison, K Caliri, VJ Palombella and CC Fritz

*Infinity Pharmaceuticals, Cambridge, MA, USA*

# IPI-504 Phase 2 Trial in NSCLC

## Mutant EGFR Cohort



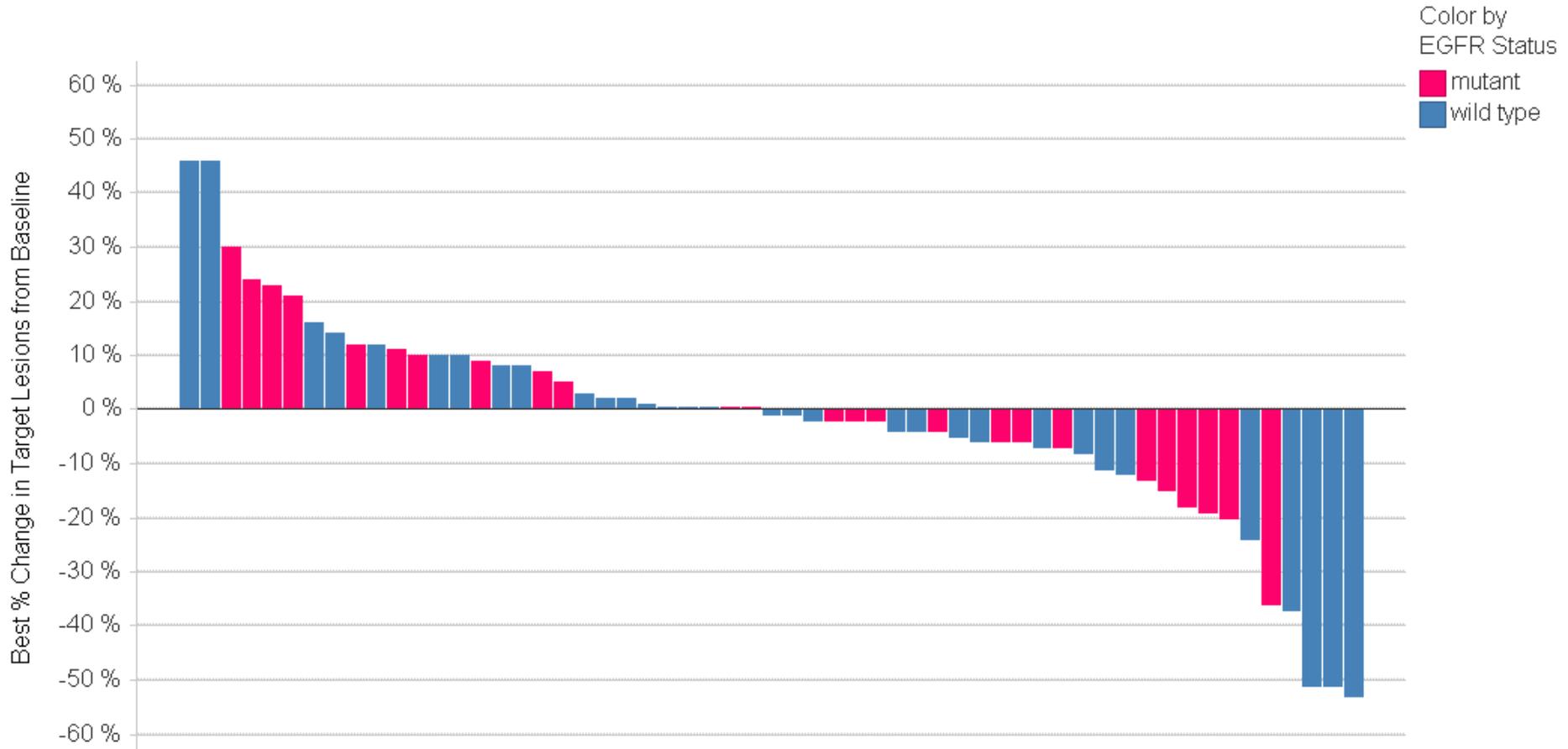
## Wild Type EGFR Cohort



# Demographics and Baseline Characteristics

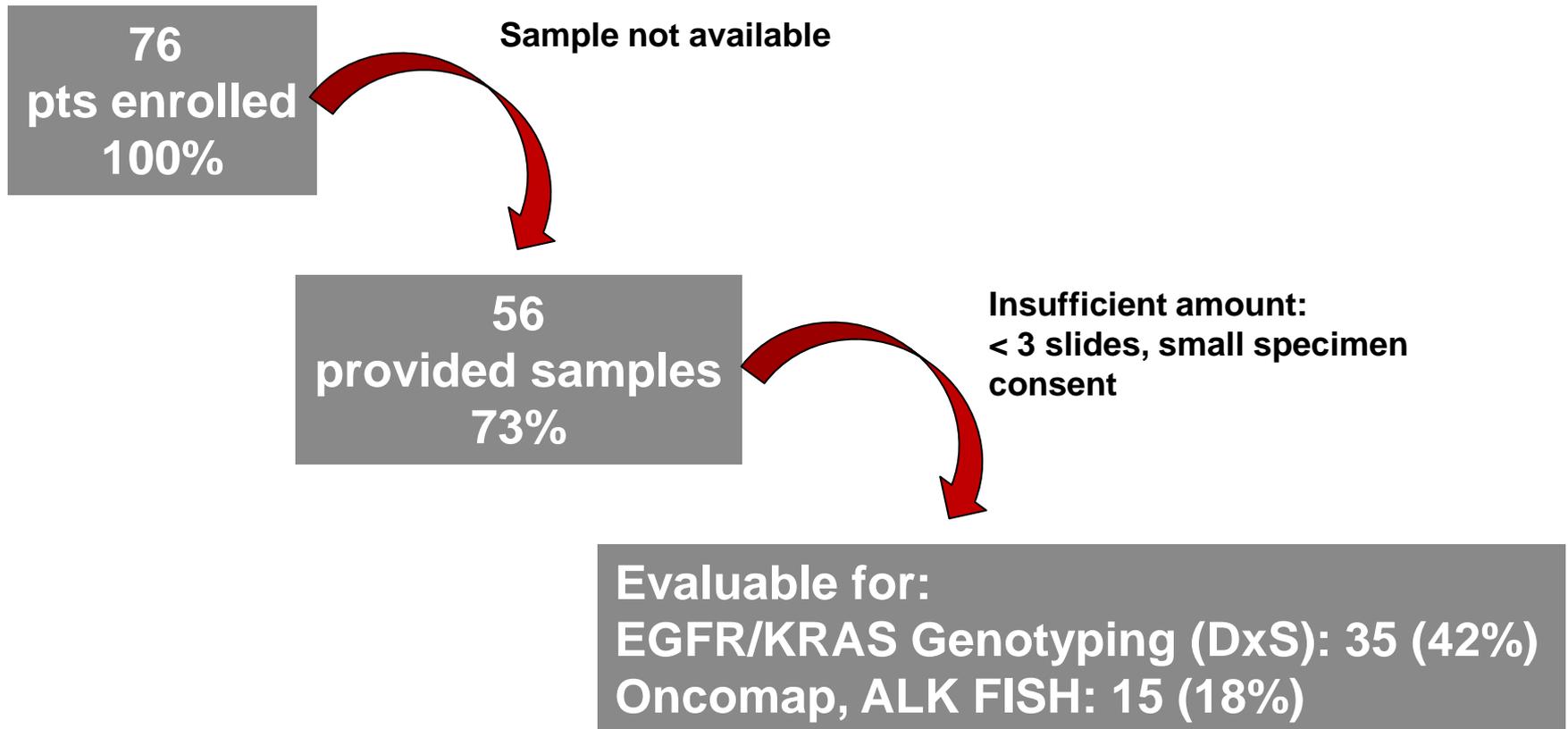
<b>Number of Patients</b>		<b>Total</b>
		<b>76</b>
Age (years)	Median	64.0
	Range	31-82
Sex (n [%])	Female	48 (63)
	Male	28 (37)
Race (n [%])	Asian	11 (14)
	Black or African American	4 (5)
	White	61 (80)
Smoking Status (n [%])	Current Smoker	0
	Never Smoked	34 (45)
	Previous Smoker	42 (55)
Months since Diagnosis	Median	27.5
	Range	8-120
Histology (n [%])	Adenocarcinoma	59 (78)
	Bronchioloalveolar	4 (5)
	Large cell	2 (3)
	Squamous	6 (8)
	Unspecified NSCLC	5 (7)
Number of prior treatment regimens for NSCLC	Median	4.0
	Range	1-11
Best prior response to TKI treatment	CR	1 (1)
	PR	18 (24)
Total months on TKI prior to study	Median	1.8
	Range	0-61

# Best Percent Change in Size of Target Lesions by EGFR Status

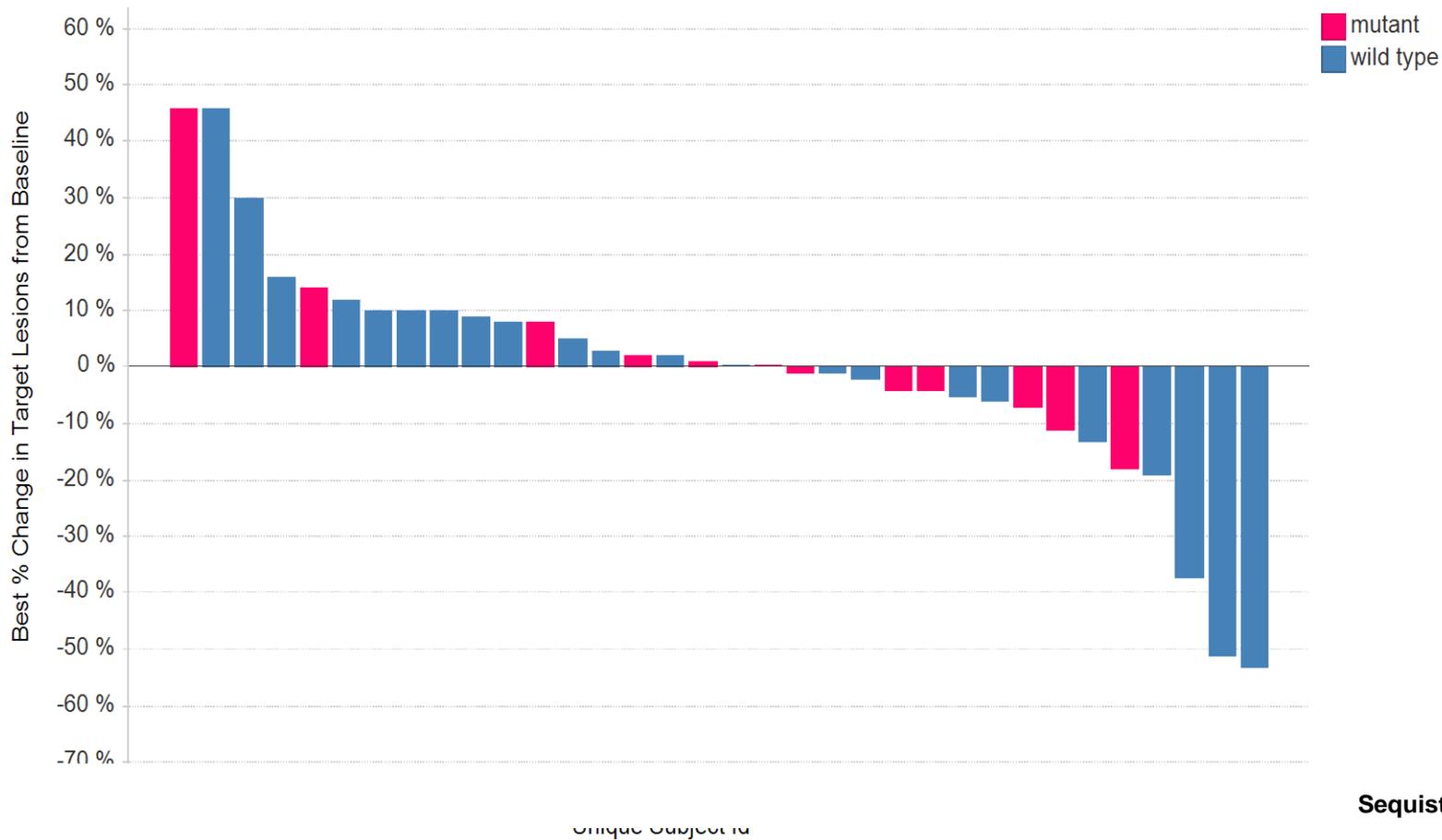


Sequist, ASCO 2010

# Samples for Biomarker Analysis



# Best Percent Change in Size of Target Lesions by KRAS Status



Sequist, ASCO 2010

# Oncomap Analysis

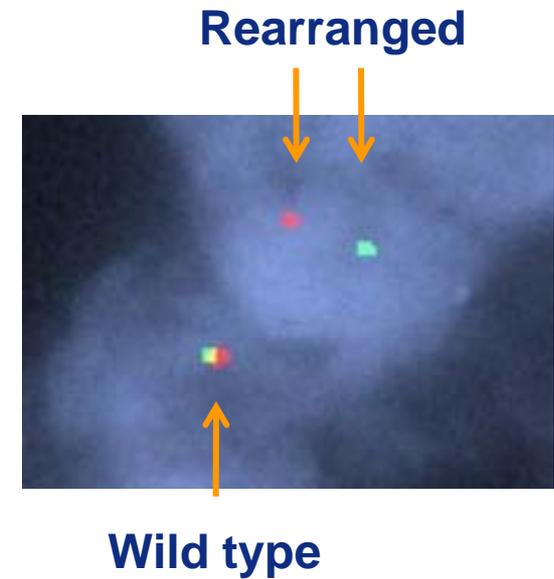
- **Oncomap:**
  - A primer extension/mass spec-based analysis of mutations in oncogenes
  - Coverage: 1155 mutations in 114 genes
- **Results:**
  - No additional mutations found in any of the patient samples analyzed (including 3 PRs)

# Assay for ALK Translocations: Fluorescent In Situ Hybridization (FISH)

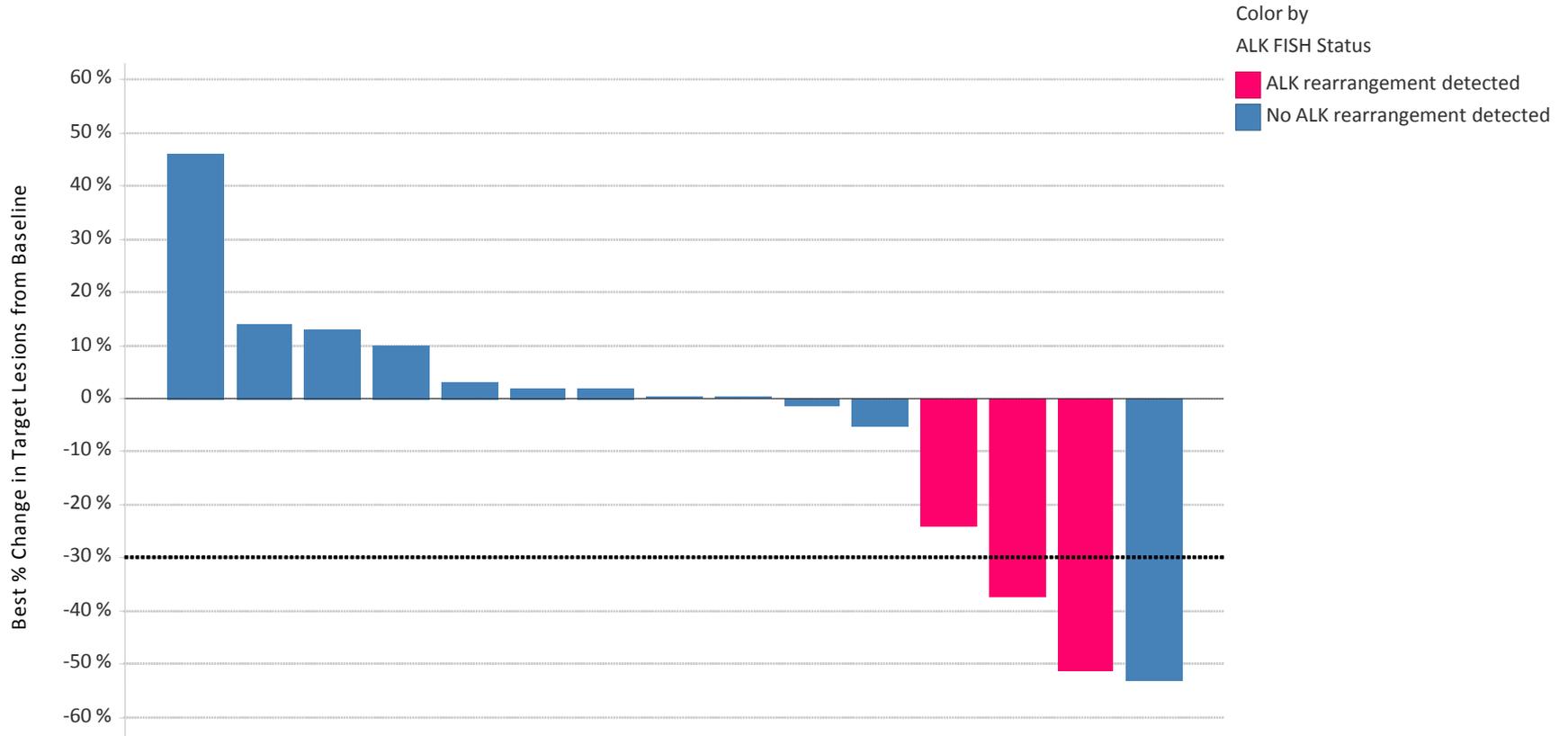
Wild type ALK locus: probes overlap



Rearranged ALK locus: probes apart



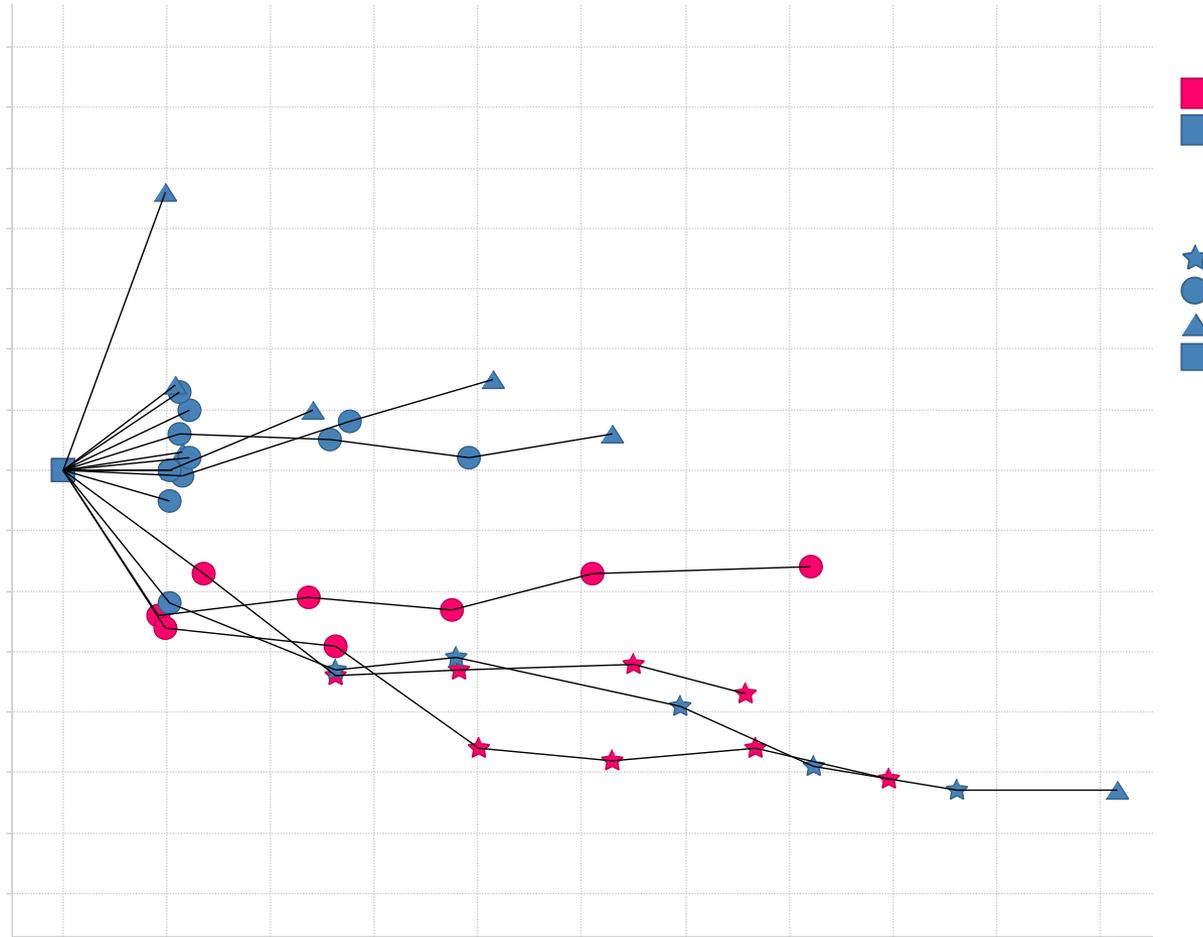
# Best Percent Change in Size of Target Lesions by ALK FISH Status



Each Bar is an Individual Patient

Sequist, ASCO 2010

# Change in Size of Target Lesions Over Time for Patients Tested for ALK Rearrangement



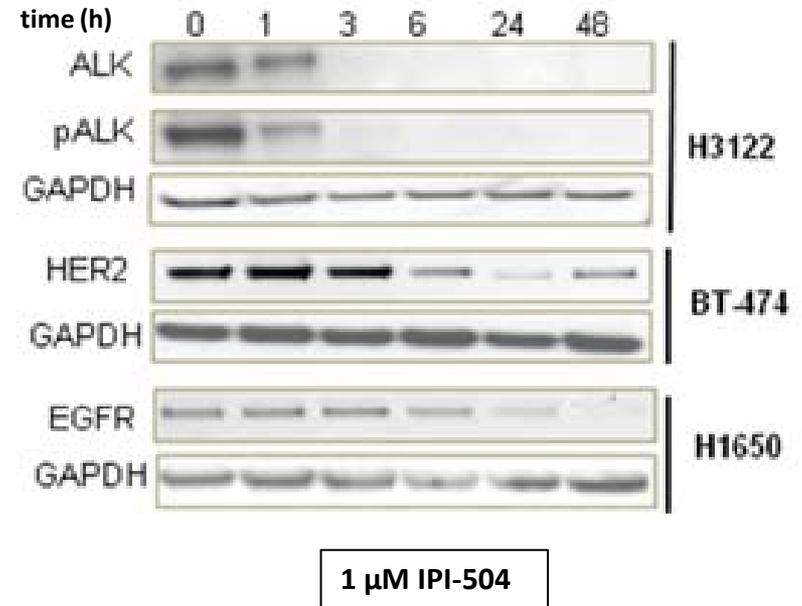
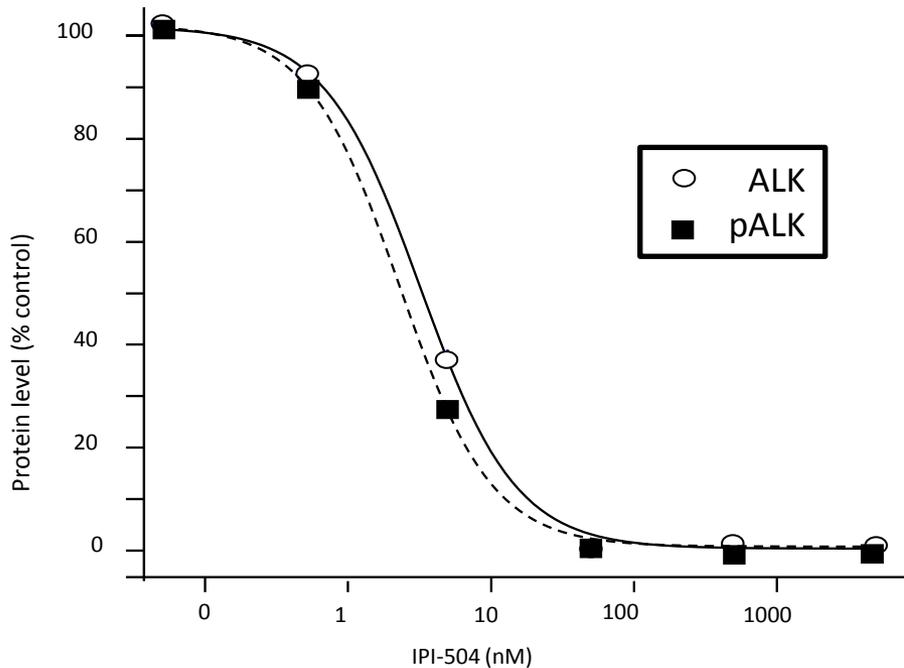
Sequist, ASCO 2010

# Overall Efficacy

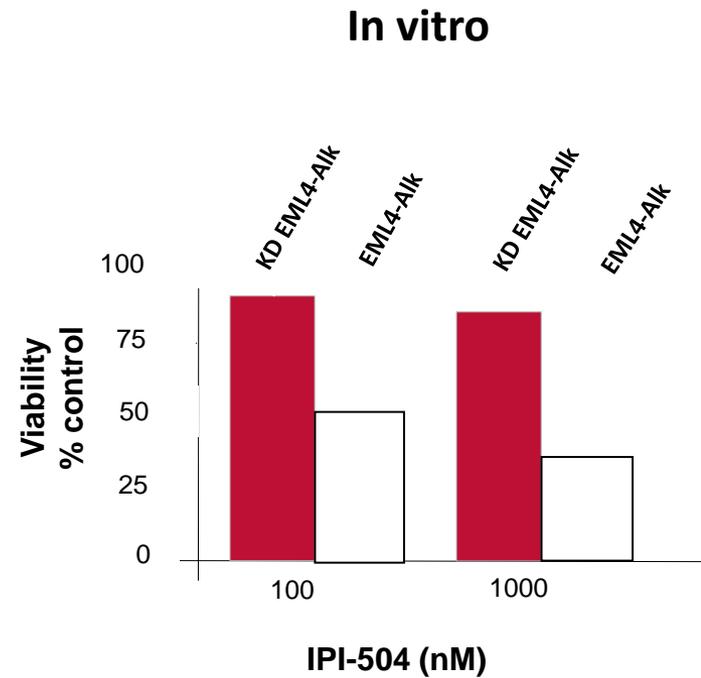
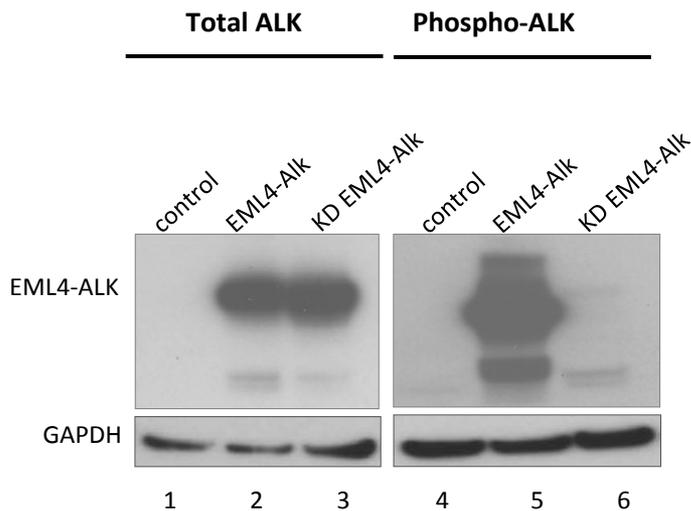
	Total	EGFR Status (n=68)		KRAS Status (n=38)		ALK Status (n=15)	
		Wild Type	Mutant	Wild Type	Mutant	Wild Type	Rearranged
Number of Patients (n [%])	76	40 (53)	28 (37)	26 (34)	12 (16)	12 (16)	3 (4)
Objective Response Rate (All PRs) (n [%])	5 (7)	4 (10)	1 (4)	3 (12)*	0 (0)	1 (8)	2 (67)
RECIST Stable Disease or better for at least 3 months (n [%])	18 (24)	10 (25)	6 (21)	4 (15)	5 (42)	3 (25)	3 (100)
Median PFS in Months (95% CI)	2.86 (2.43-4.18)	2.86 (1.18-5.33)	2.76 (2.40-3.91)	2.86 (1.22-10.20)	3.91 (1.12-4.18)	2.43 (1.13-5.33)	Unable to determine

Sequist, ASCO 2010

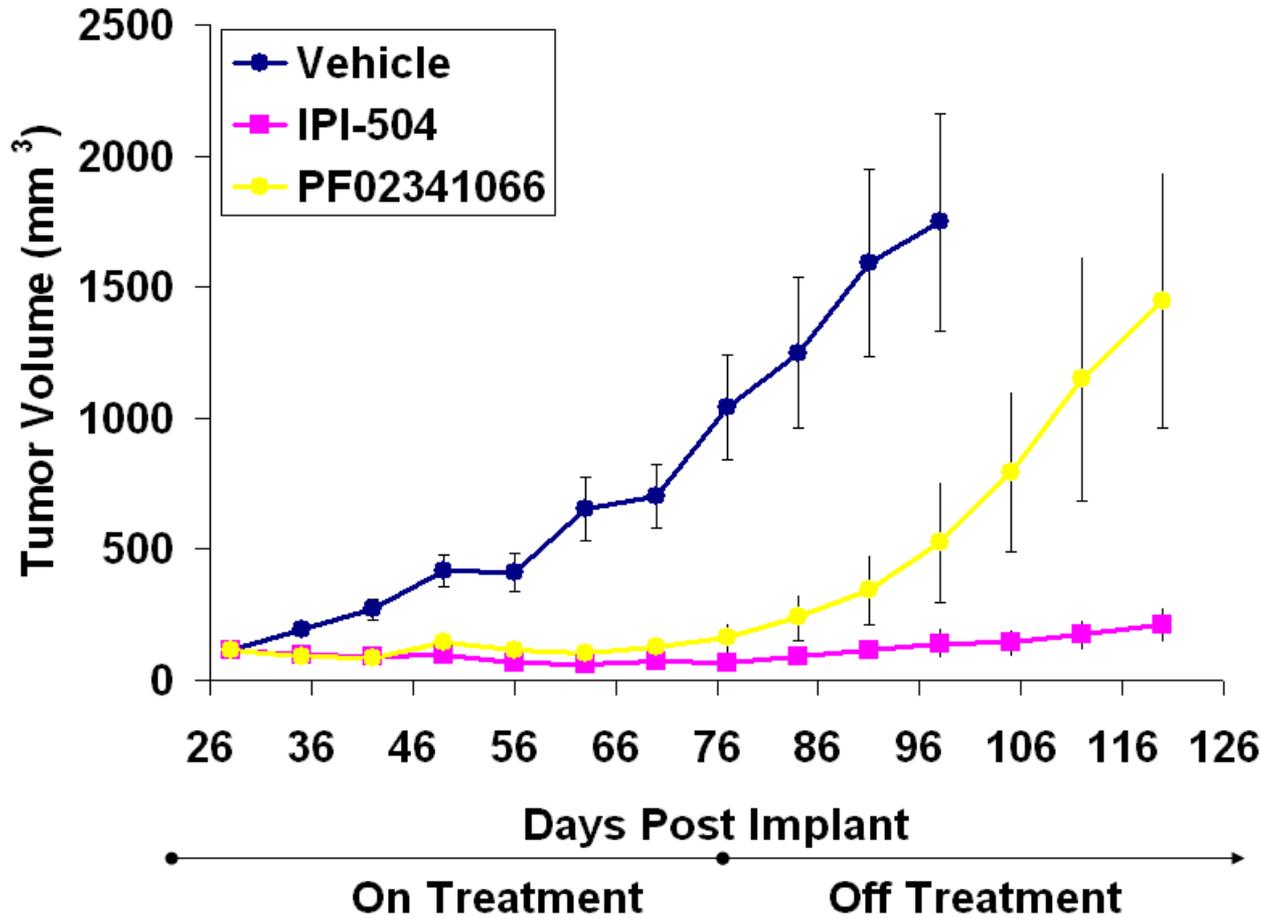
# Nonclinical Findings: EML4-ALK is a More Sensitive Client Protein than mut EGFR or HER2



# EML4-ALK Expression Sensitizes HEK293 Cells to IPI-504

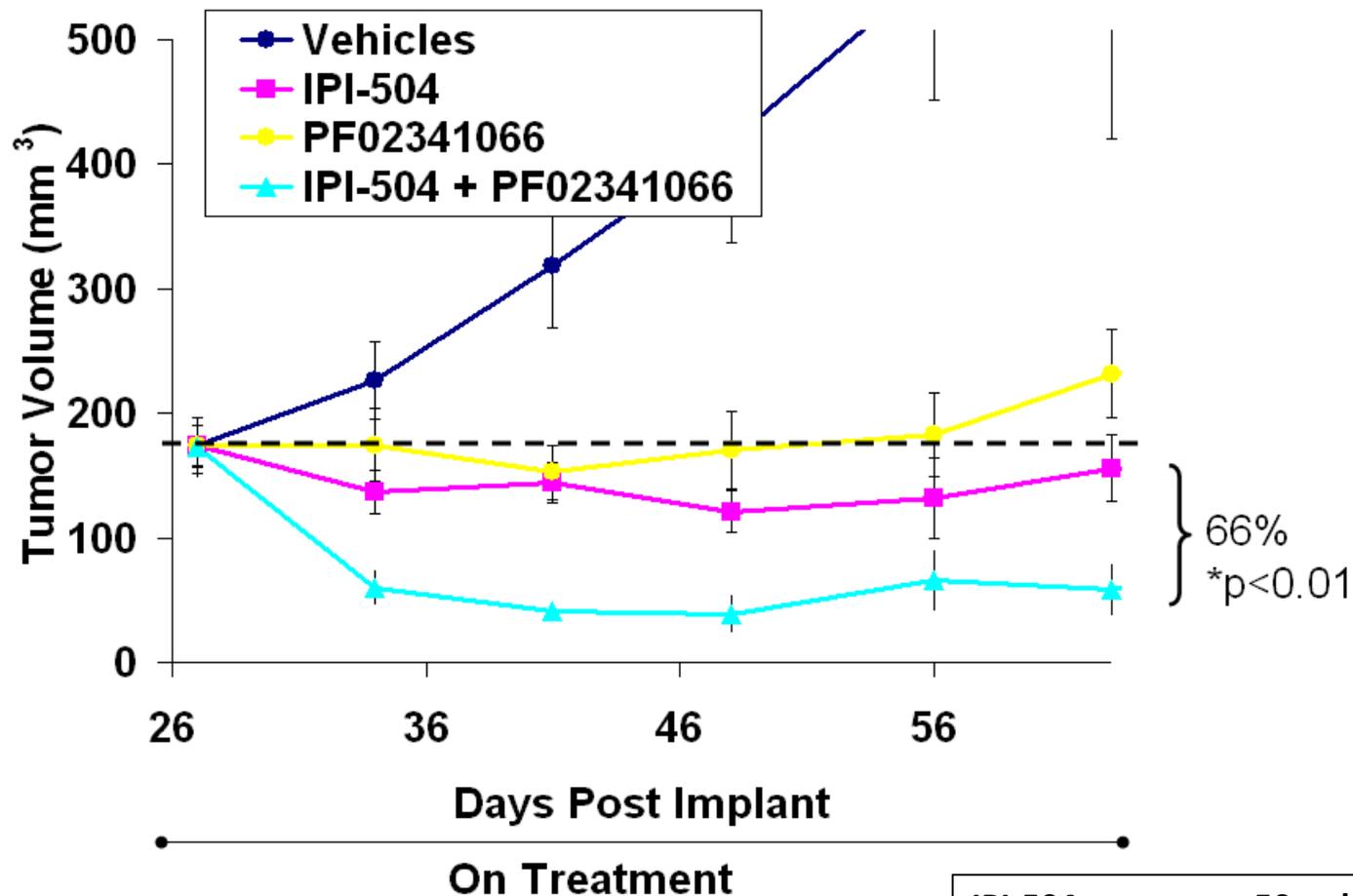


# IPI-504 Treatment Results in Tumor Regressions in the H3122 Xenograft Model



**IPI-504:** 75mg/kg, IP, BIW  
**PF-02341066:** 37.5mg/kg, PO, QDX5

# IPI-504 Combination With PF-1066 in the H3122 Xenograft Model



IPI-504: 50mpk, IP, BIW  
PF-02341066: 37.5mpk, PO, QDX5

# H3122 NSCLC Cells Selected for Resistance to ALK Kinase Inhibitor Retain Sensitivity to IPI-504

	<b>Wt H3122 (GI<sub>50</sub>, nM)</b>	<b>Res. H3122 (GI<sub>50</sub>, nM)</b>	<b>Fold change</b>
IPI-504	22	76	3.4
PF-02341066	166	2000	12.0
TAE-684	50	3141	63.0

# Conclusions

- **EML4-ALK is the most sensitive Hsp90 client protein we have studied to date**
- **Expression of EML4-ALK can sensitize cells to IPI-504 treatment**
- **Combinations of IPI-504 and ALK kinase inhibitors lead to pronounced tumor regressions in xenograft models of human NSCLC**
- **Cells selected for resistance to ALK kinase inhibitors retain sensitivity to IPI-504**
- **In patients, rearrangements in the ALK locus are associated with responses to IPI-504 as a single agent**
- **Validation of this finding is ongoing in a prospective trial of IPI-504 in patients with NSCLC and an ALK rearrangement**

# Acknowledgements



- The patients, families and caregivers who participate in our clinical trials
- The clinical investigators who have worked with IPI-504
- The team at Infinity Pharmaceuticals and our collaborators