

Sapna P. Patel¹, Steven C. Katz^{2,3,4}, Rahul A. Sheth¹, Ravi Murthy¹, Virginia Honaker¹, Chantell M. Farinas¹, Mara L. Casteneda¹, Laura Timciuc¹,
Tarin Hennegan¹, Cara Haymaker¹, Victor G. Prieto¹, Bryan Cox², Ann-Marie Hulstine², Jason LaPorte², Ashley Moody², Marlana Orloff⁵, Richard D. Carvajal⁶

¹The University of Texas MD Anderson Cancer Center, Houston, TX, ²TriSalus Life Sciences, Westminster, CO, ³Department of Surgery, Brown University, Providence, RI, ⁴Lifespan Health System, Providence, RI, ⁵Thomas Jefferson University, Philadelphia, PA, ⁶Columbia University Medical Center, New York, NY

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Contact: SPPatel@mdanderson.org

Background

- Liver tumors are resistant to immune infiltration in part due to a highly tolerogenic tumor microenvironment (TME) that includes the presence of myeloid-derived suppressor cells (MDSCs).
- This results in low responses to checkpoint inhibitors in patients with liver metastasis (LM).
- Toll-like receptor agonists have been studied in combination with checkpoint inhibitors, with little success in patients with liver tumors when delivered by needle injection.
- Overcoming the pressure gradient as well as immunosuppression are keys to successful immune responses in the liver.

Methods

- PERIO-01 is an open-label first-in human Phase 1 trial of the TLR9 agonists SD-101 given by hepatic arterial infusion (HAI) using Pressure-Enabled Drug Delivery™ (PEDD™) in metastatic uveal melanoma (MUM) (NCT04935229).
- SD-101 is delivered over 2 cycles, with 3 weekly doses per cycle.
- Plasma was analyzed for SD-101 levels by LC-MS and cytokine levels by Luminex.
- NanoString was used to analyze gene expression levels within PBMCs, LM, and normal liver tissue and nSolver advanced analysis was performed to score for cell types and pathways.

Results

Figure 1. PEDD™ of SD-101 via HAI increases plasma levels of IFN γ and TNF α for LM-bearing MUM patients

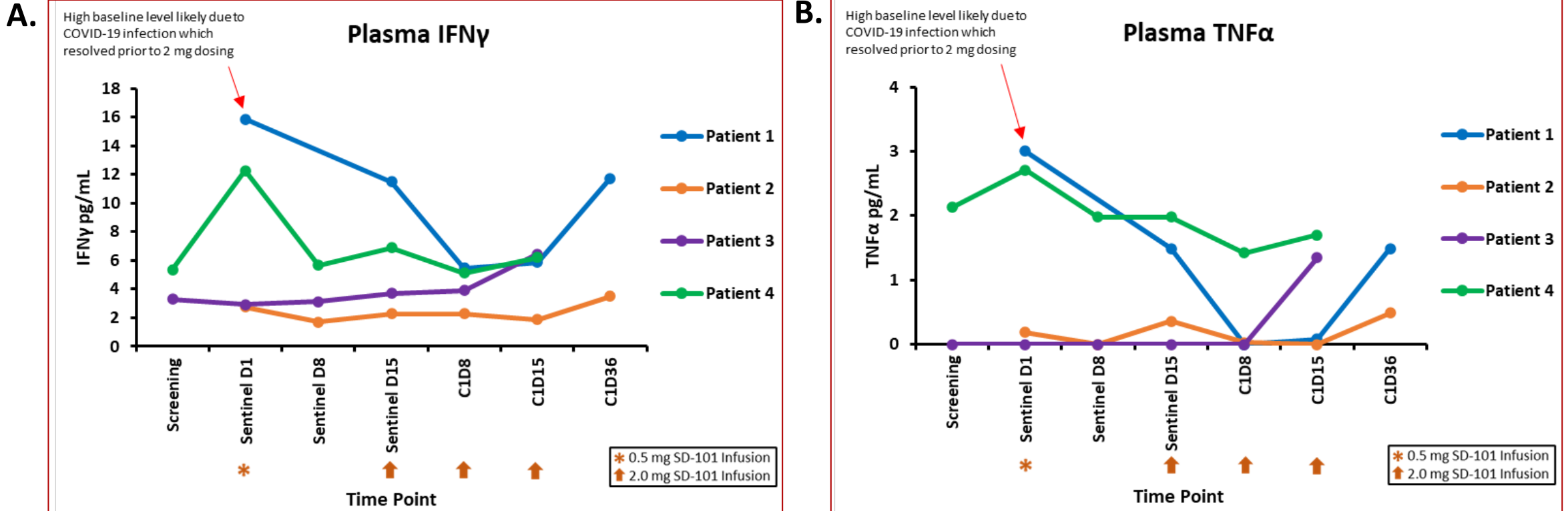


Figure 1. Plasma was collected at the indicated time points, either between infusion days or pre-infusion. Plasma cytokines were analyzed for A. IFN γ and B. TNF α using Luminex.

Summary

- Plasma levels of IFN γ and TNF α trended up following SD-101 cycle 1, with only transient serum drug levels (<137 ng/mL, <4 hours).
- NanoString analysis of gene expression levels in LM one month following SD-101 cycle 1 revealed increases in ISG15, IL-9, IFN α , and IL-2 transcripts, with increased scores for macrophages, exhausted CD8 T cells, Th1 cells, and Th1 activation.
- Within normal liver tissue, there was a decrease in scores for exhausted CD8 T cells, Th1 cells, and total T cells.
- Gene expression analysis of PBMCs revealed instances of increased scores for NK, B, and Th1 cells despite low serum drug levels.
- Expression of genes associates with MDSC, including ARG1, IDO1, CSF2 (GM-CSF), and NOS2 decreased within LM.

Conclusions

SD-101 HAI via PEDD™ has been well tolerated at the 2 mg dose level with demonstration of SD-101 activity within the LM TME in MUM patients. Reciprocal changes in genes in normal liver suggests migration of immune cells into LM. The TME reprogramming demonstrated thus far, including reduction in MDSC-associated genes, may support better immune checkpoint inhibitor performance in MUM and other intrahepatic indications presently under study.

Figure 2. Plasma levels of SD-101 are transient and remain low following PEDD™

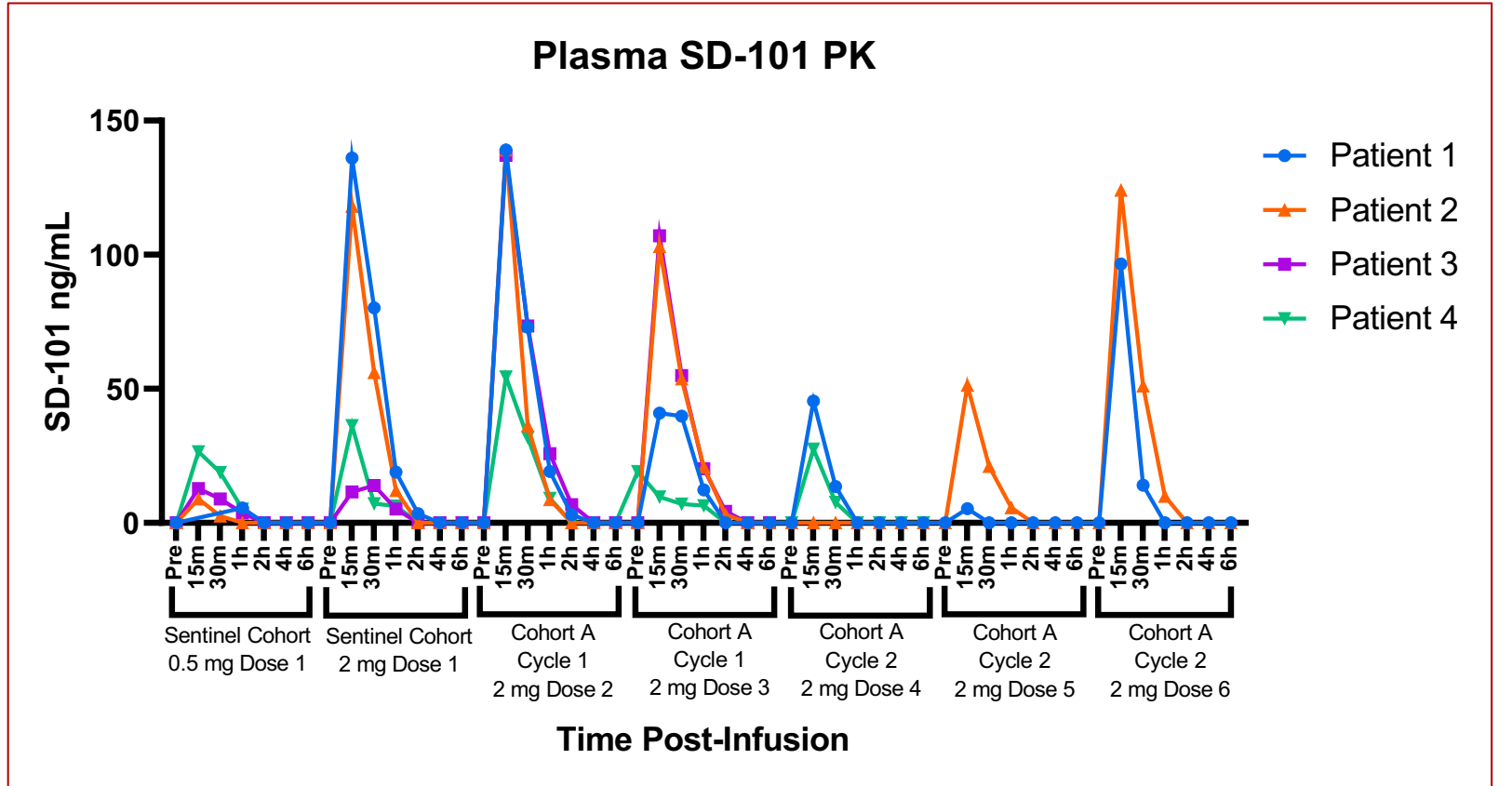


Figure 2. Plasma was collected on infusion days at the indicated time points and analyzed for SD-101 levels by LC-MS.

Figure 3. SD-101 treatment produces a favorable shift in gene expression patterns

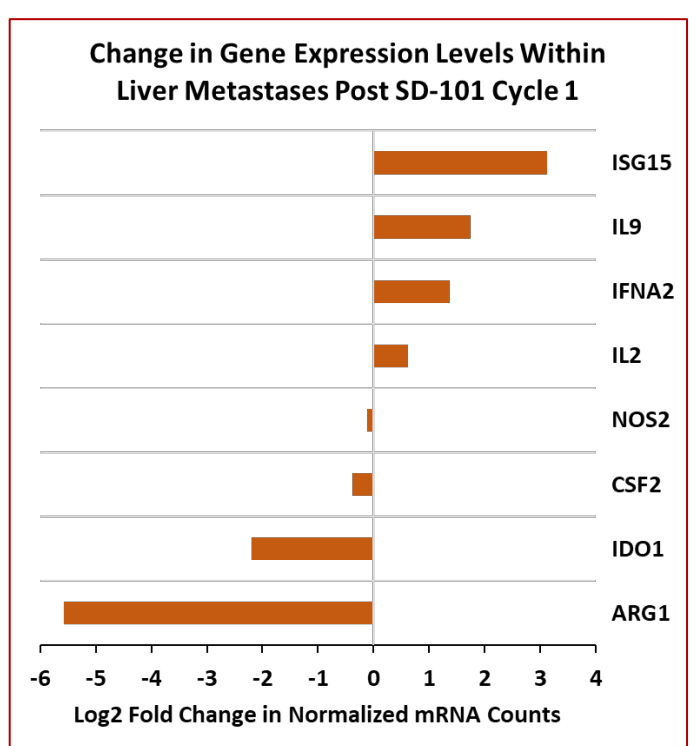


Figure 3. NanoString analysis of LM at baseline and post-cycle 1.

Figure 4. PEDD™ of SD-101 via HAI creates a shift in the immune microenvironment in both LM and normal liver tissue

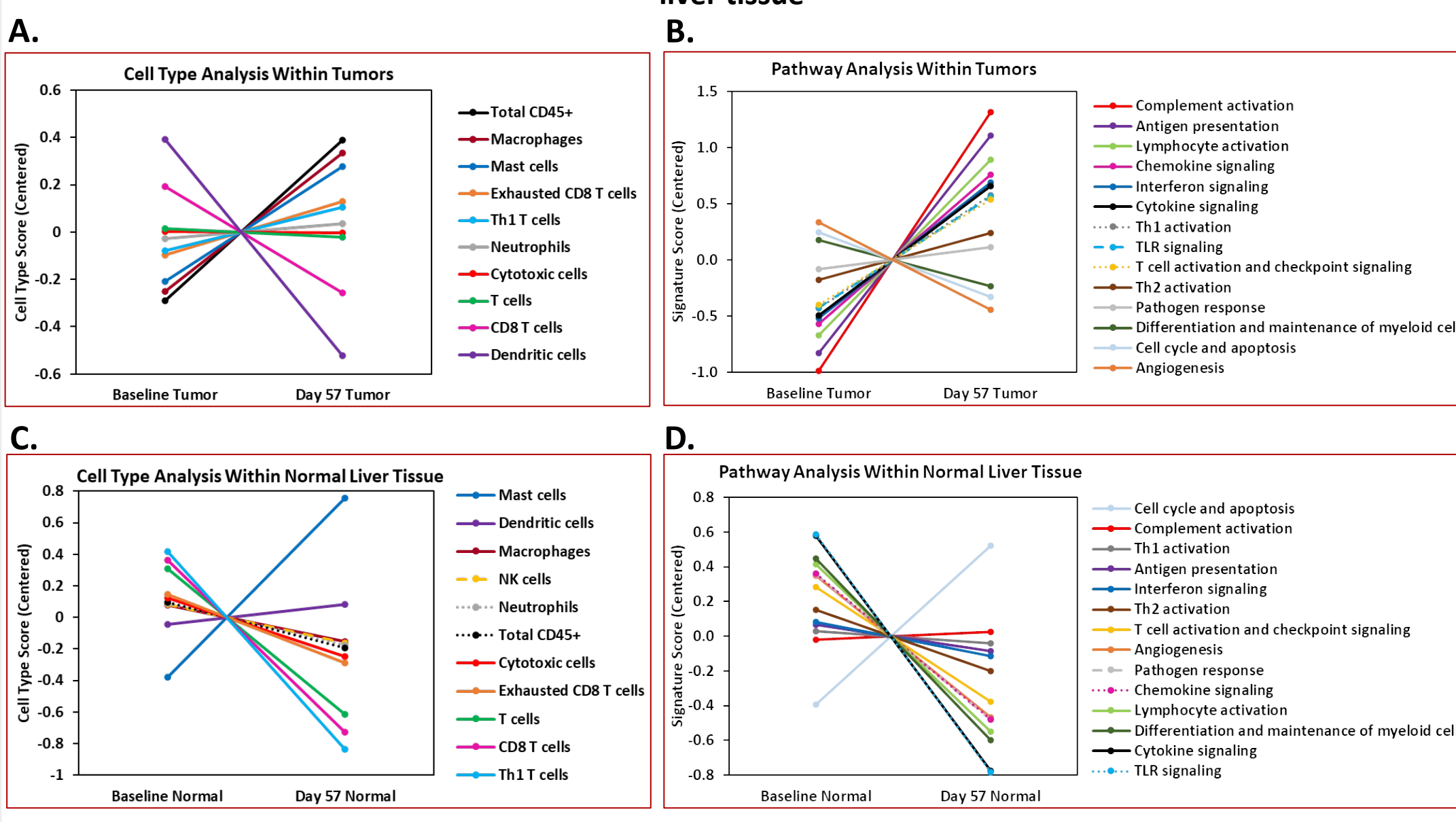


Figure 4. Cell type and pathway scoring determined by advanced analysis of NanoString gene expression data of LM and normal liver tissue at baseline and following SD-101 cycle 1 (Day 57). Scores were generated for cell types within tumors (A.) and normal liver tissue (C.), and pathways within tumors (B.) and normal liver tissue (D.).

Figure 5. PEDD™ of SD-101 via HAI leads to increases in circulating NK cells, CD56dim NK cells, B cells, and Th1 T cells in some subjects.

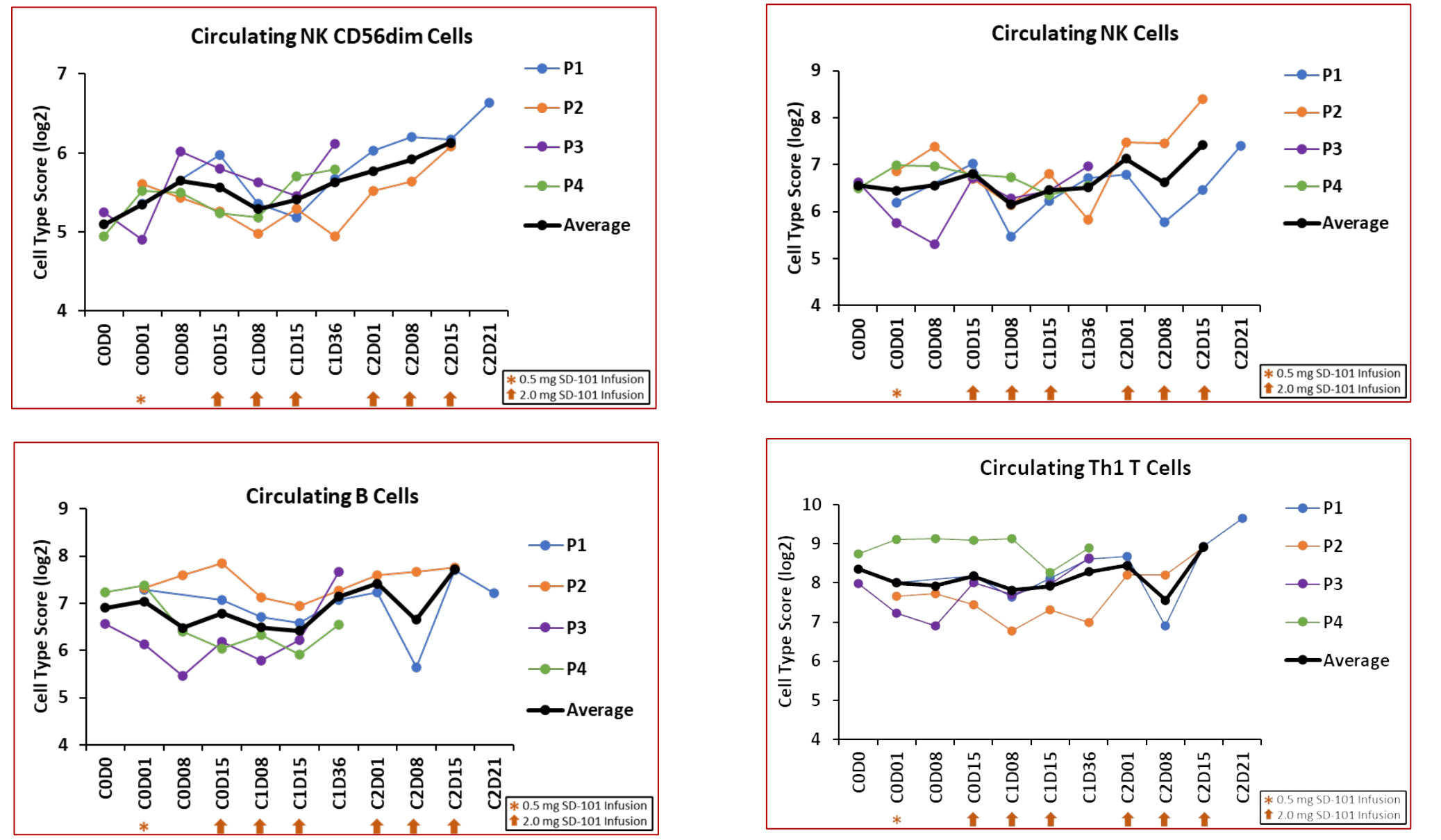


Figure 5. Cell type scoring determined by advanced analysis of NanoString gene expression data of PBMCs collected at the indicated time points. Scores were generated for NK CD56dim cells (A.), NK cells (B.), B cells (C.), and Th1 T cells (D.).

View the Clinicaltrials.gov site for the PERIO-01 trial:



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