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of Harvard Medical School

Next Generation ALK Inhibitors and Mechanisms of Resistance to Therapy

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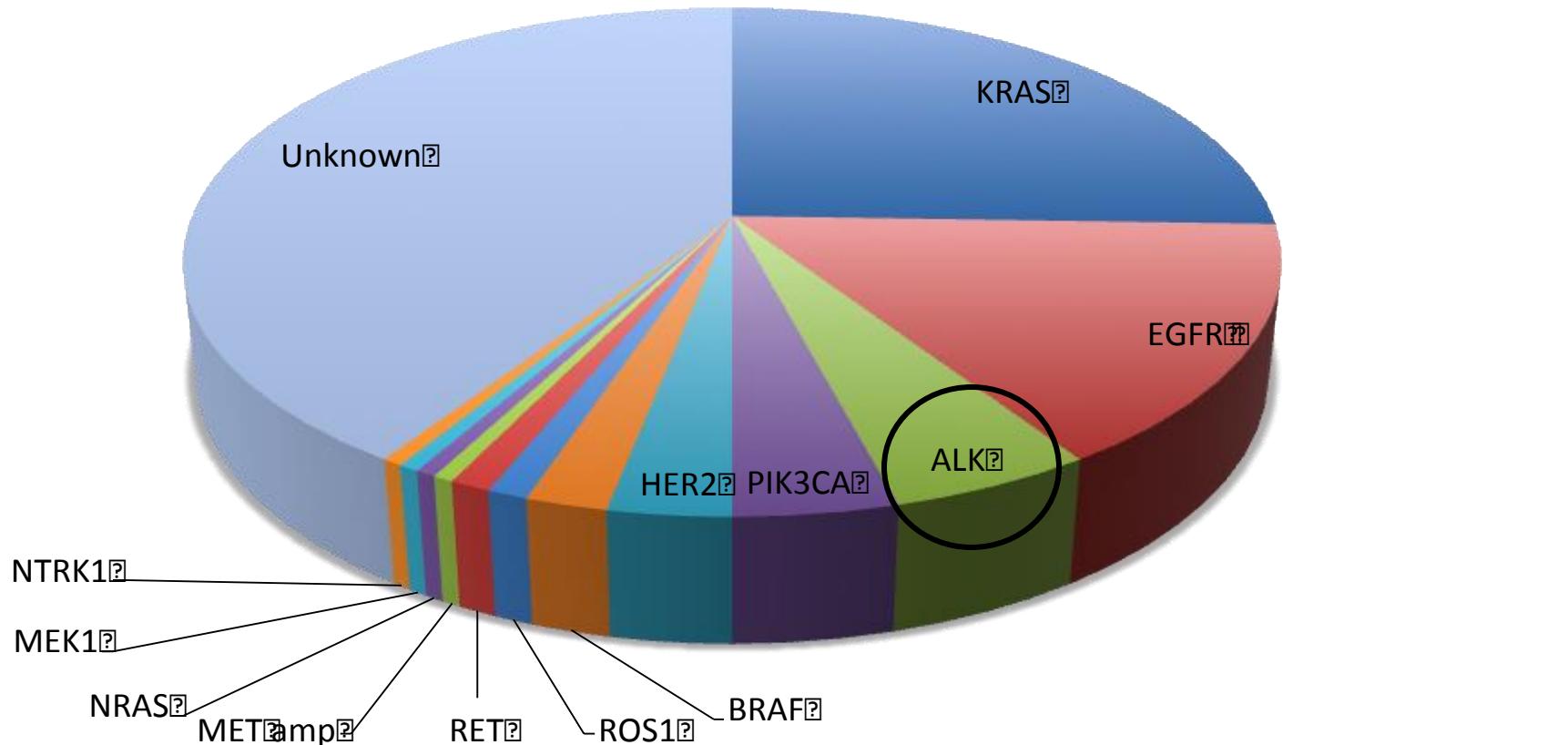
Disclosures

- *Compensated consulting for Boehringer Ingelheim, Jounce Therapeutics, and Kyowa Hakko Kirin Pharmaceuticals*



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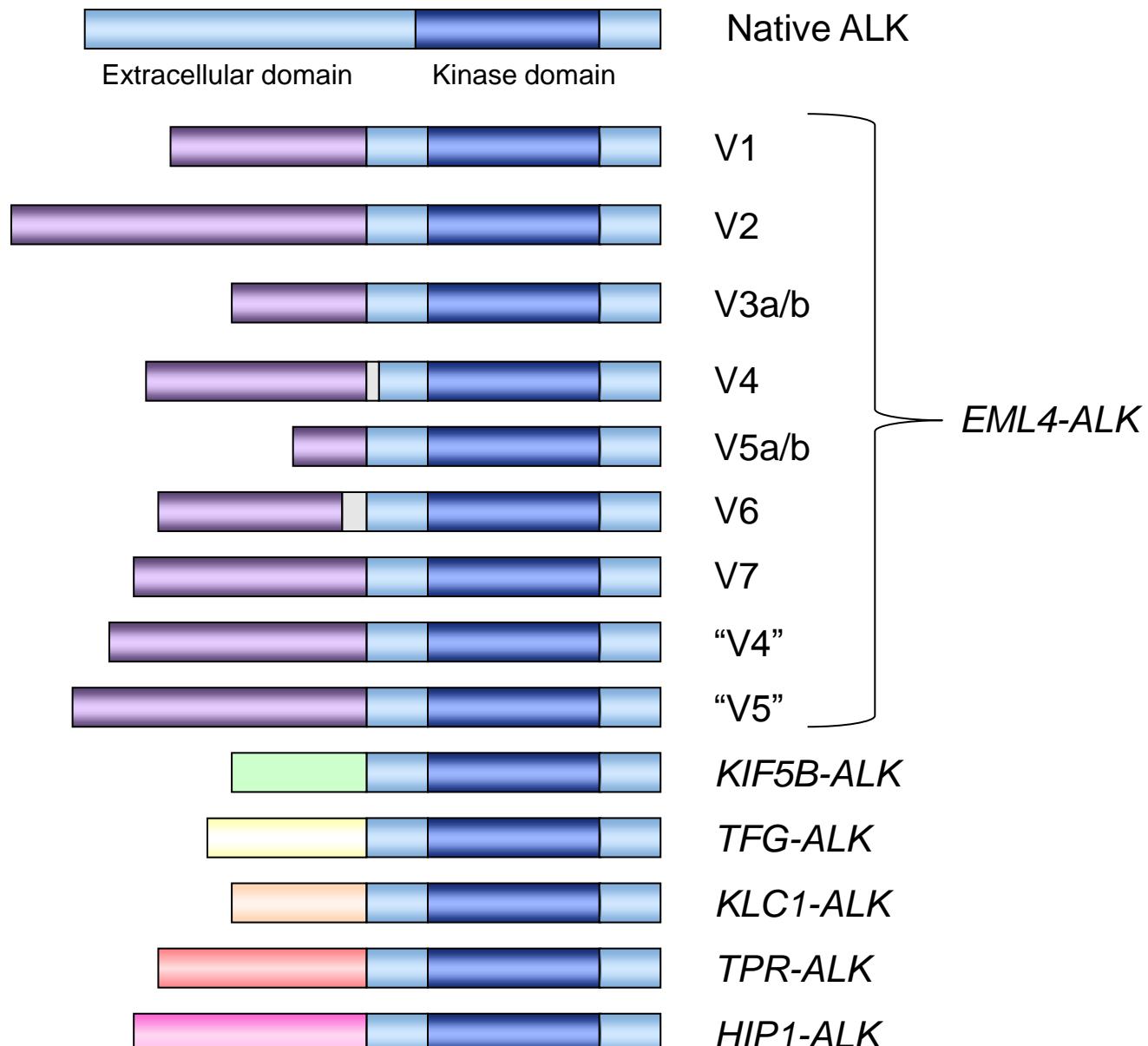
Distribution of Oncogenic Drivers in NSCLC

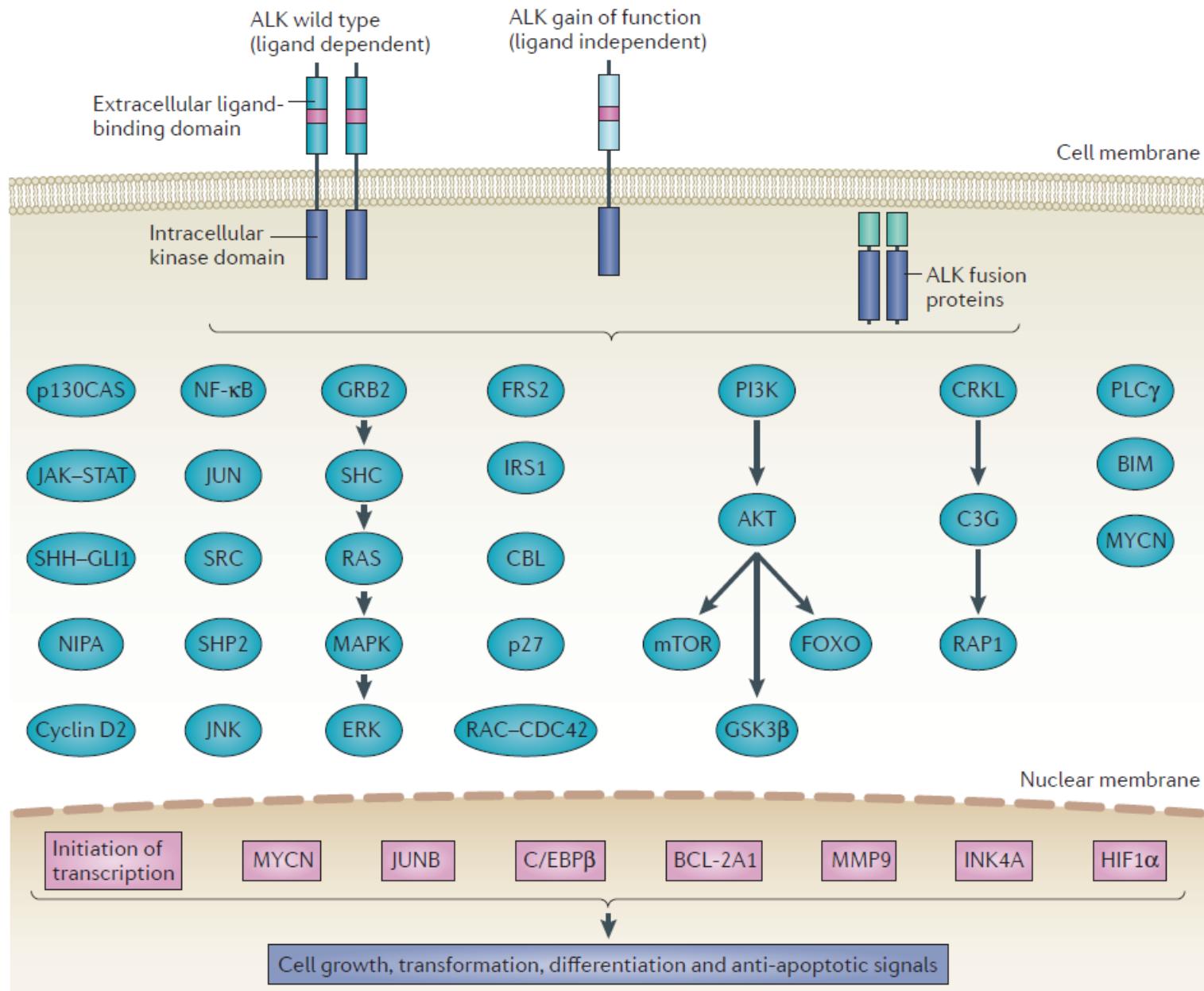


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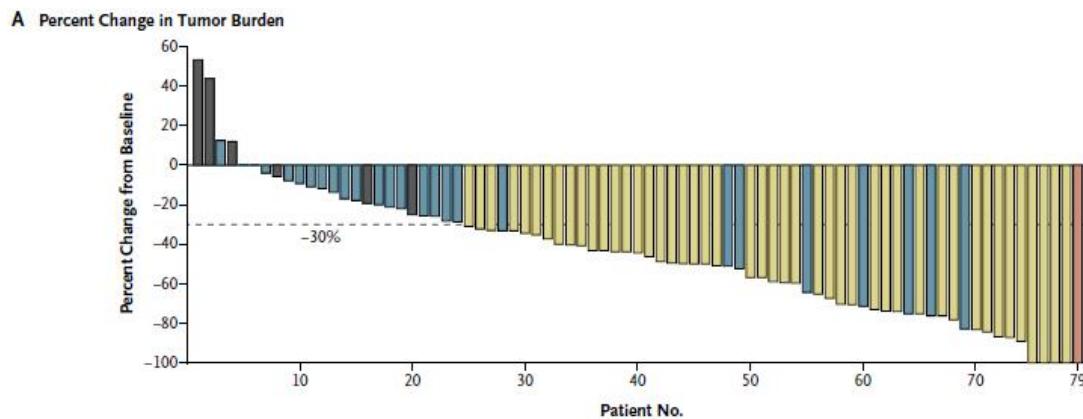
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ALK Rearrangements in NSCLC

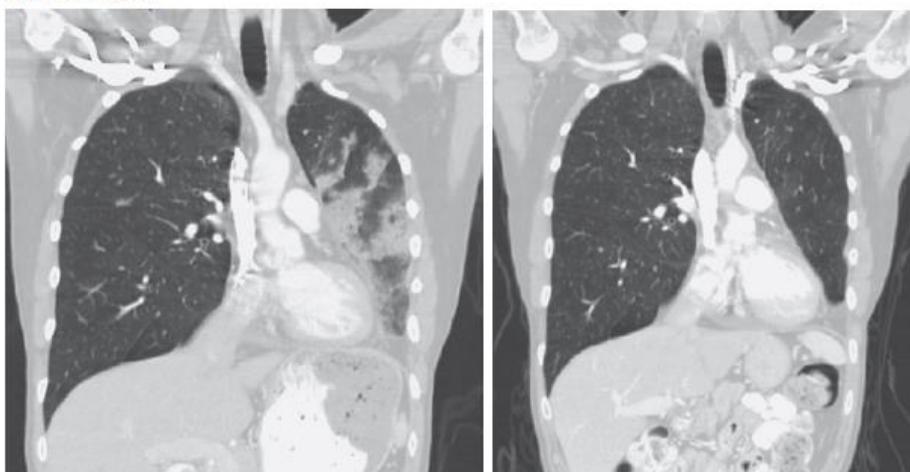




Crizotinib in ALK-Positive NSCLC



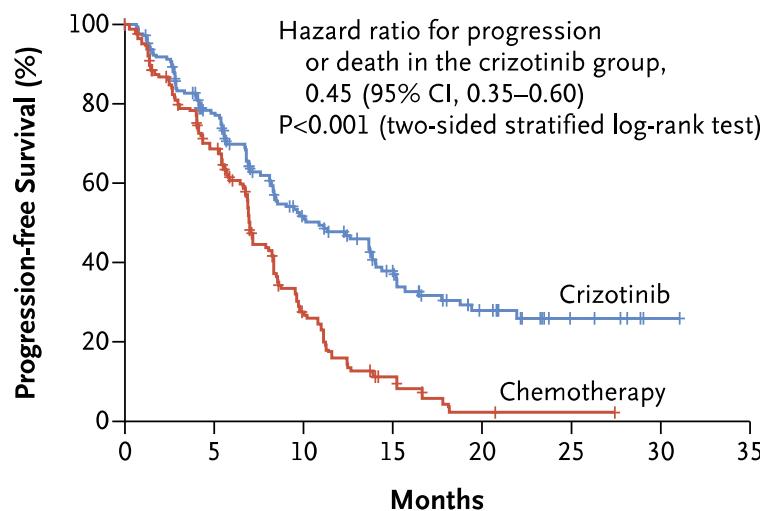
B CT before and after Crizotinib



Crizotinib in ALK-Rearranged NSCLC

PROFILE 1014

Progression-free Survival

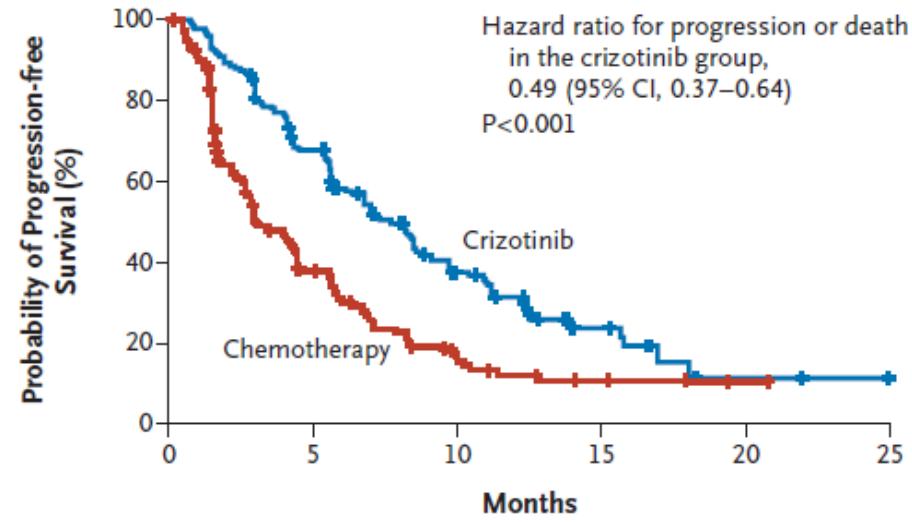


No. at Risk

	0	3	6	9	12	15	18	21	24	27	30
Crizotinib	172	120	65	38	19	7	1	0	0	0	0
Chemotherapy	171	105	36	12	2	1	0	0	0	0	0

PROFILE 1007

Progression-free Survival



No. at Risk

	0	3	6	9	12	15	18	21	24	27	30
Crizotinib	173	93	38	11	2	0	0	0	0	0	0
Chemotherapy	174	49	15	4	1	0	0	0	0	0	0

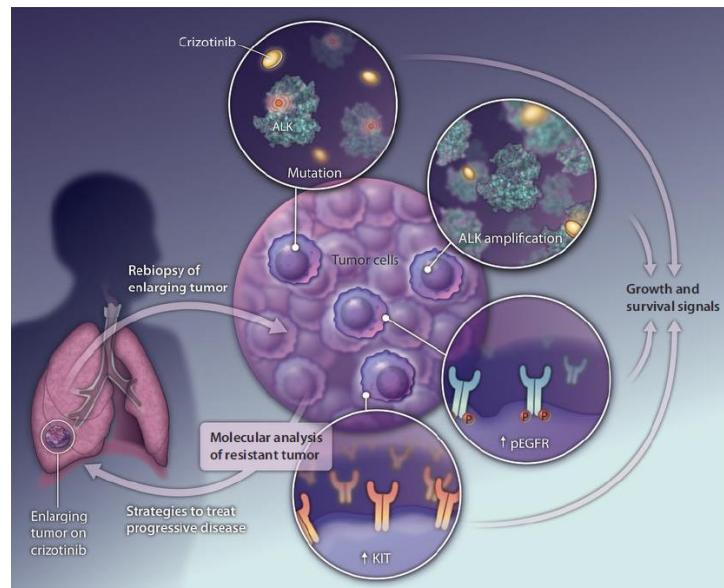


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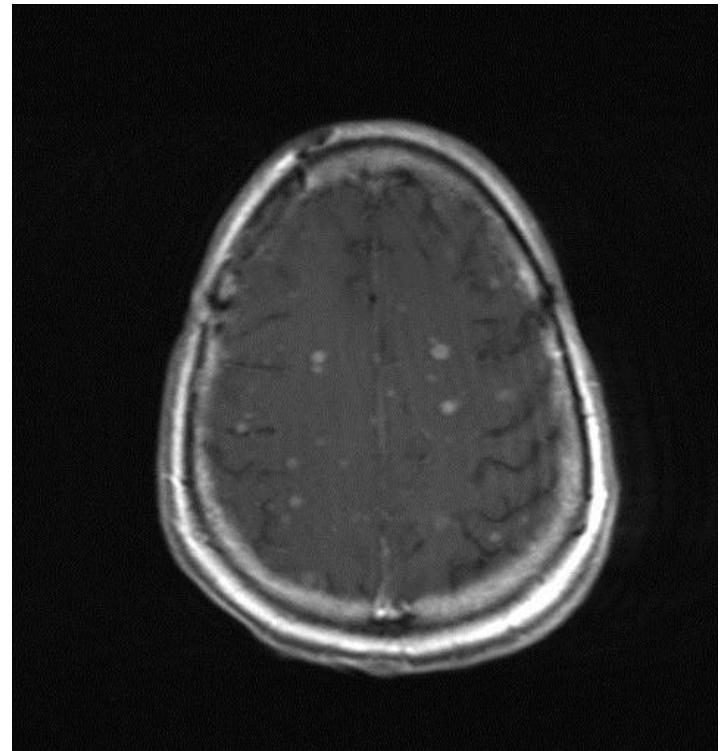
Acquired Resistance to Crizotinib

- Pharmacokinetic Failure
- *ALK* Resistance Mutations
- *ALK* Fusion Gene Amplification
- Bypass Signaling Pathways



CNS Metastases in ALK+ NSCLC

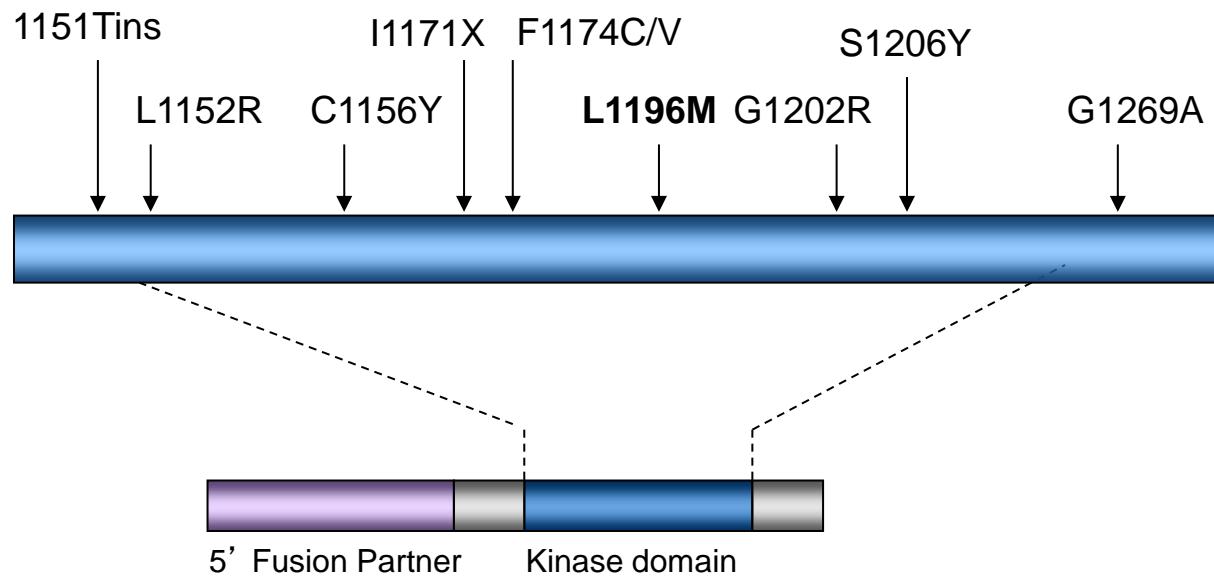
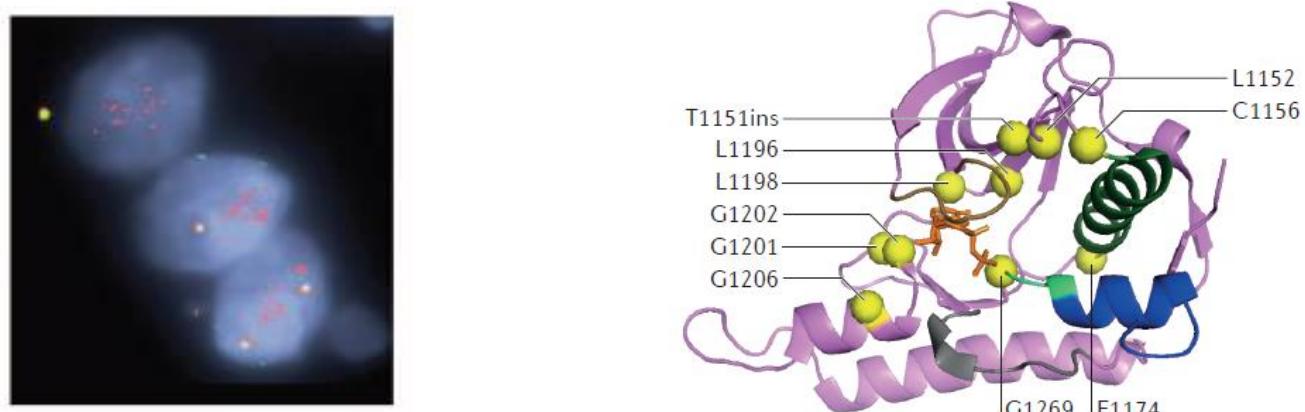
- 26% of ALK+ patients have CNS metastases at initial diagnosis.
- CNS is among the most common sites of relapse on crizotinib.
- Among crizotinib-resistant patients entering trials of next-generation ALK inhibitors, rates of CNS metastases approach 60%.



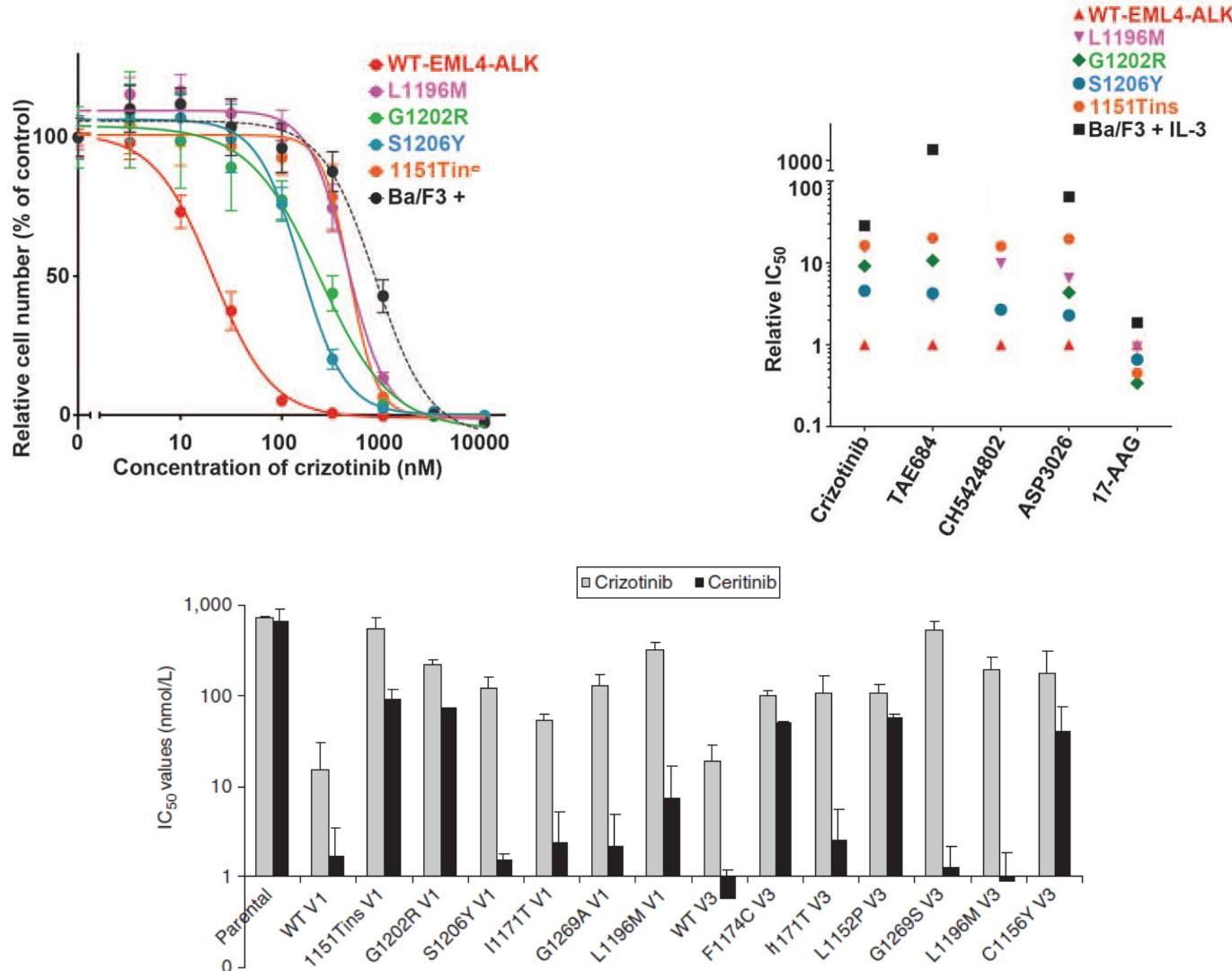
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Molecular Mechanisms of Crizotinib Resistance



ALK Resistance Mutations Confer Differential Sensitivities to Next Generation ALK Inhibitors



Next Generation ALK TKIs

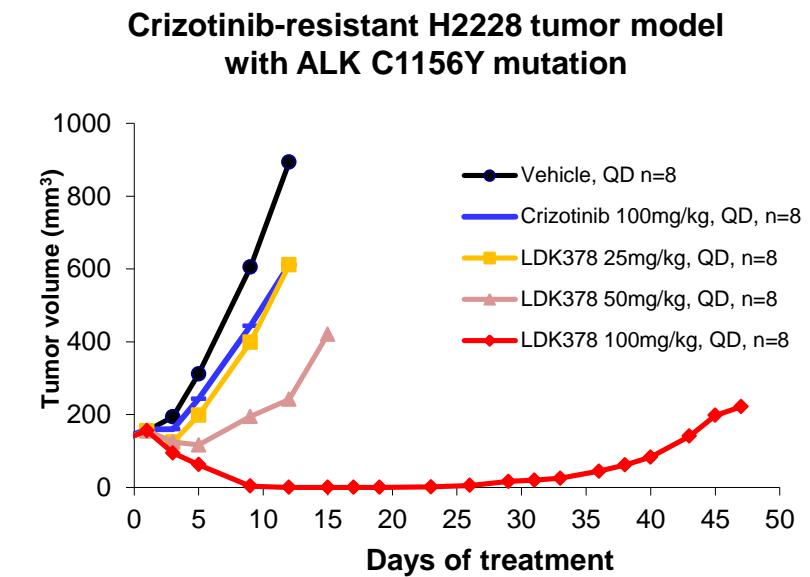
Agent	Company
Ceritinib (LDK378)	Novartis
Alectinib (CH5424802)	Roche
AP26113	Ariad
CEP-37440	Teva
Entrectinib (RXDX-101)	Ignya
PF-06463922	Pfizer
TSR-011	Tesaro
X-396	Xcovery



Preclinical Studies of Ceritinib (LDK378)

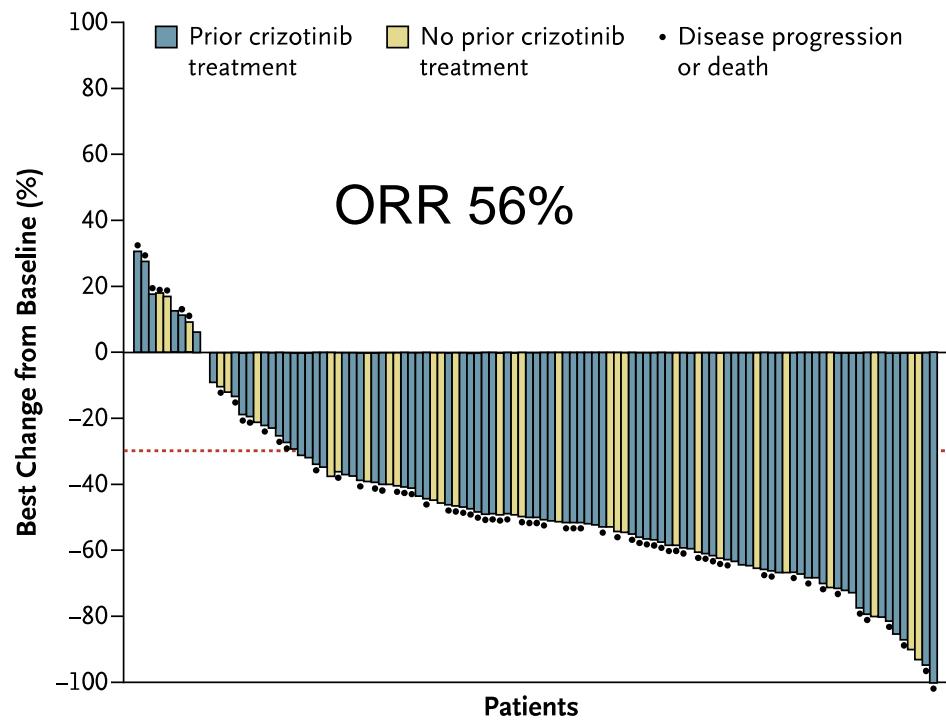
- Ceritinib is a potent and selective ALK inhibitor
- Potent activity in enzymatic and cell based assays
- Significant activity in crizotinib-resistant, *in vivo* models.

Assay	Ceritinib IC_{50} (nM)	CRZ IC_{50} (nM)
Enzymatic		
ALK	0.15	3
IGF-1R	8	400
c-Met	3200	8
Cell-based³		
EML4-ALK	20	120
- L1196M	60	810
- G1269S	140	1600
- G1202R	490	1020
- C1156Y	130	350

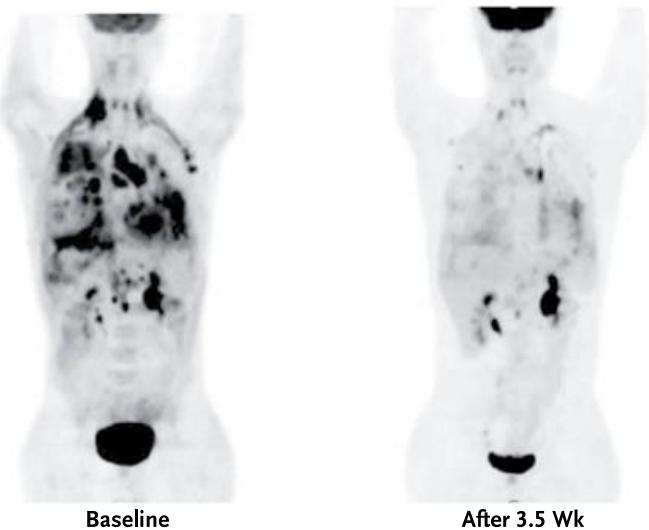


Ceritinib is Active in Crizotinib-Resistant NSCLC

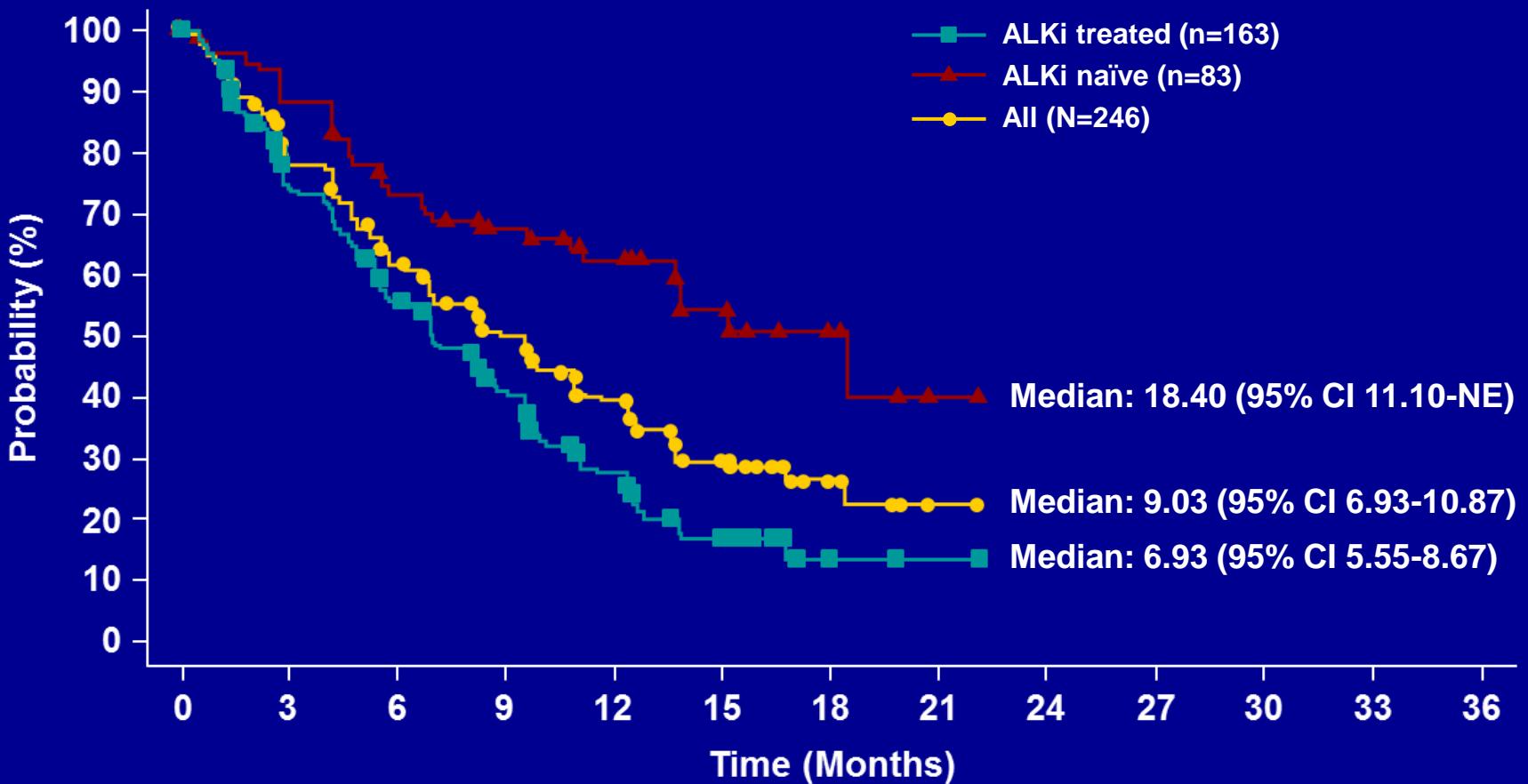
Tumor Change



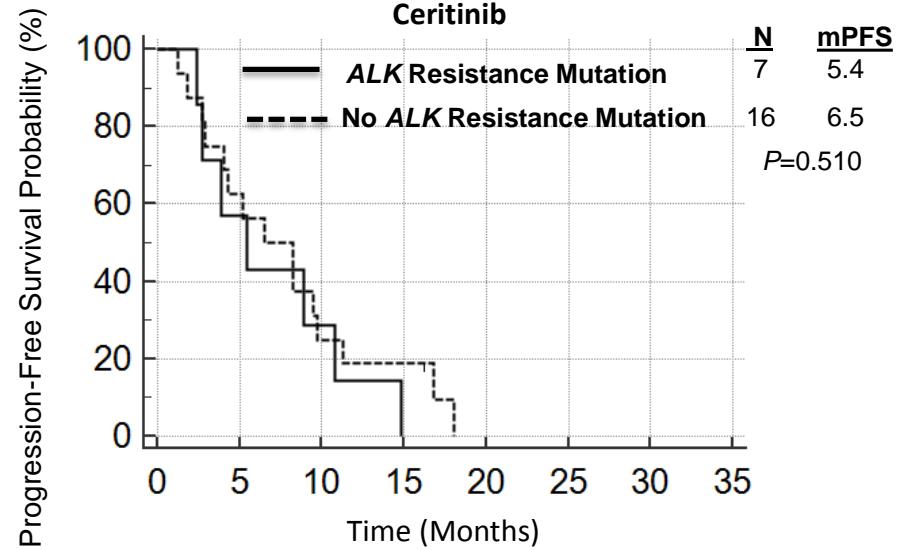
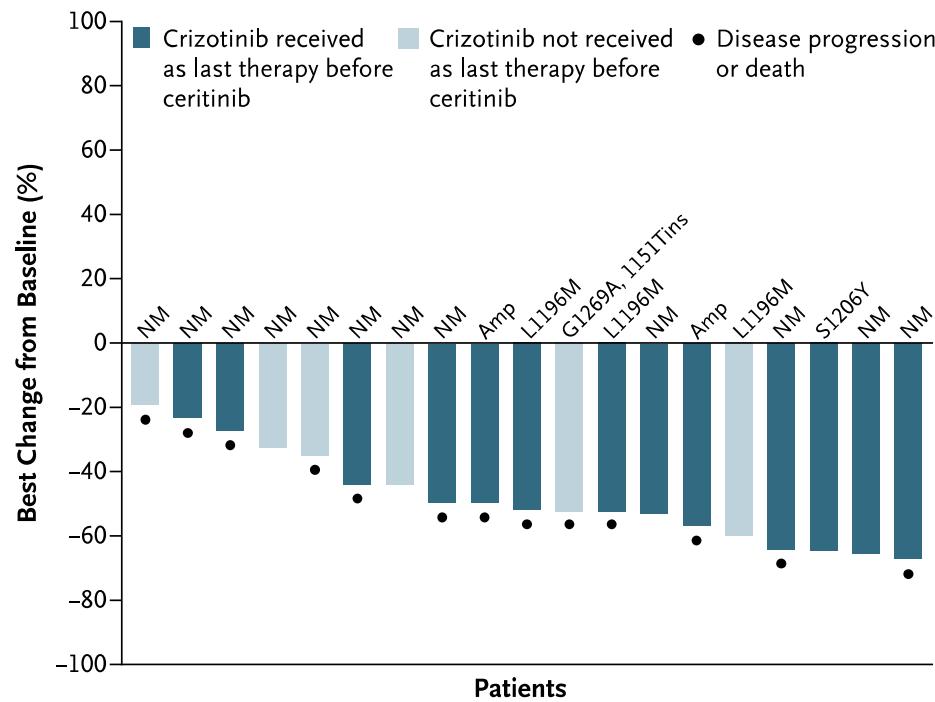
B Positron-Emission Tomographic Scans



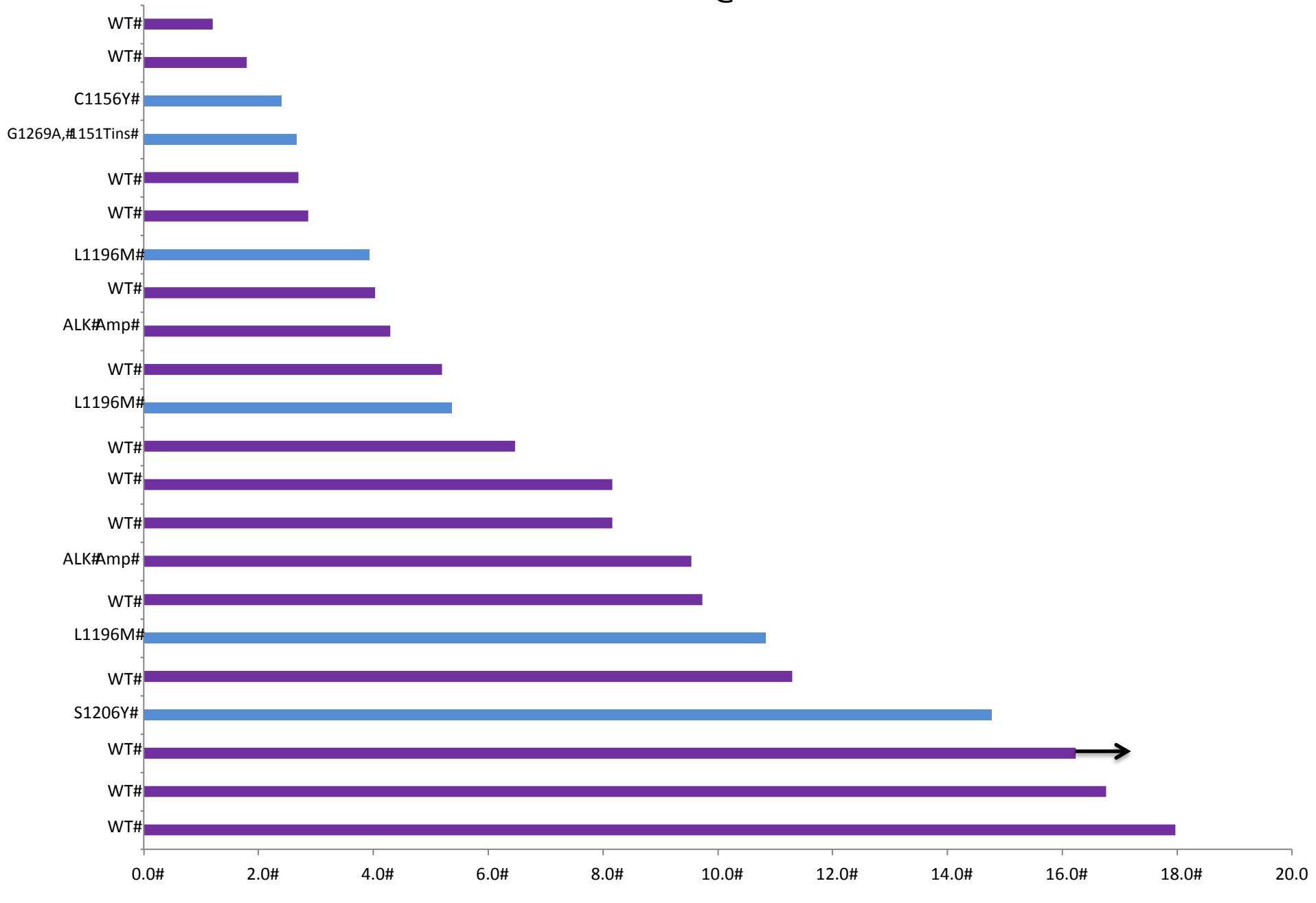
Progression-Free Survival with Ceritinib



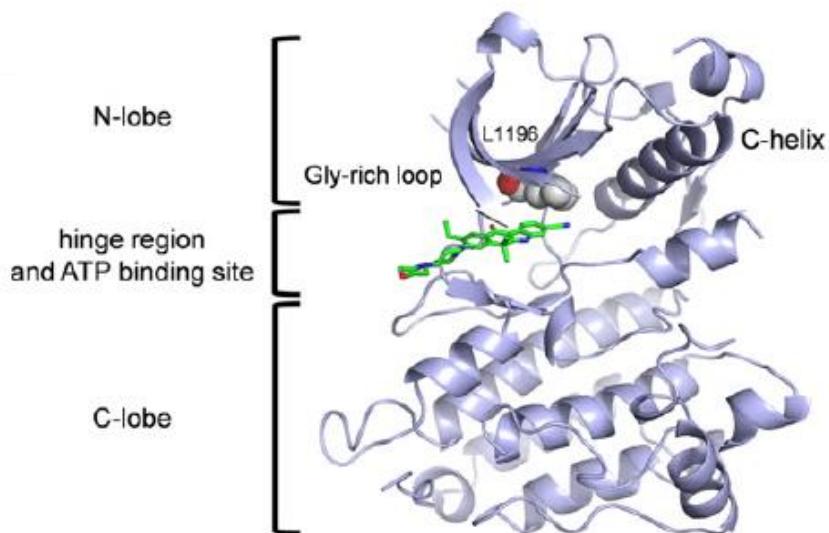
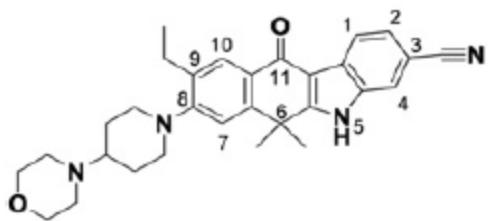
Ceritinib – Influence of ALK Secondary Mutations



Individual PFS by Ceritinib

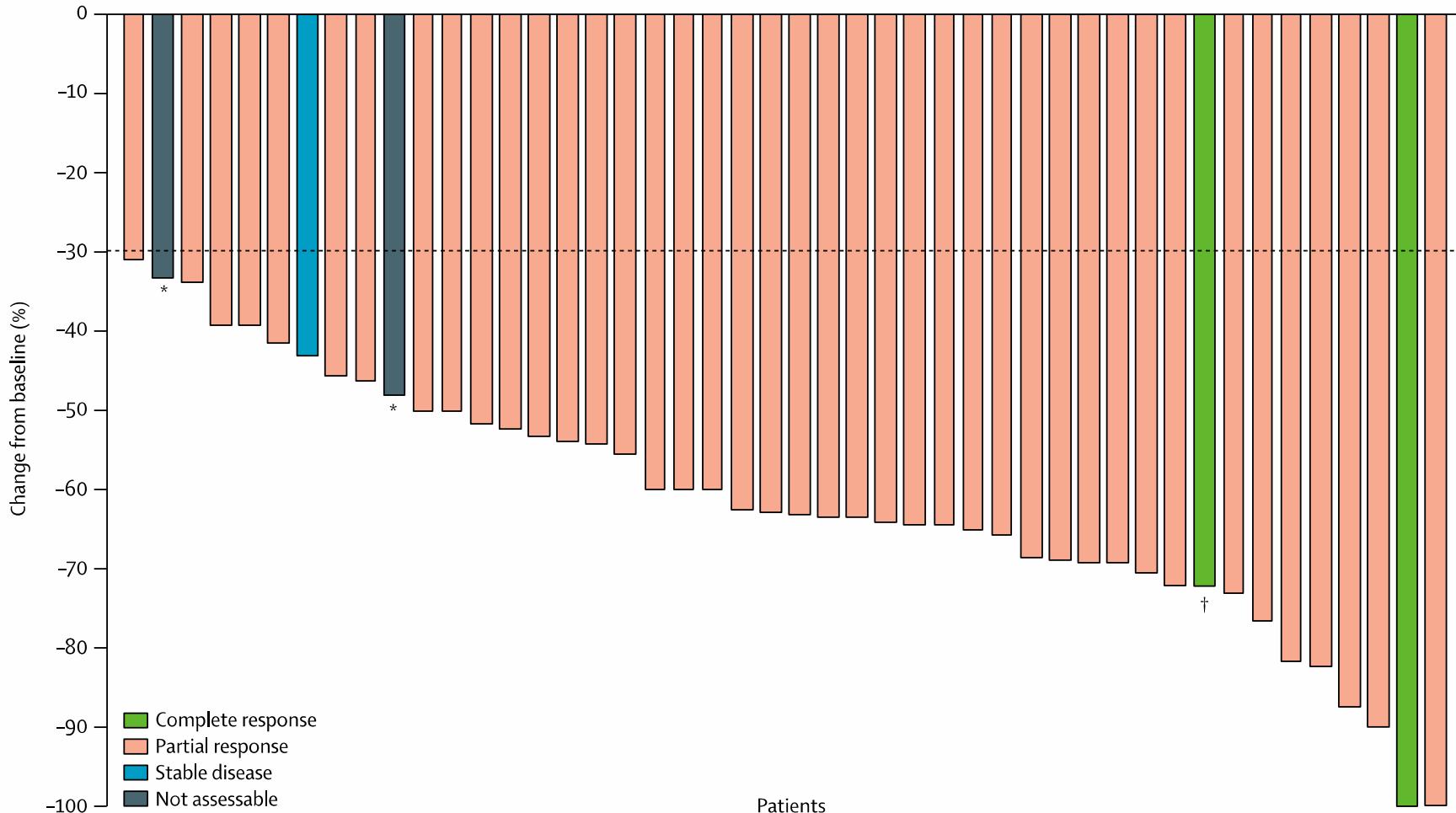


Alectinib

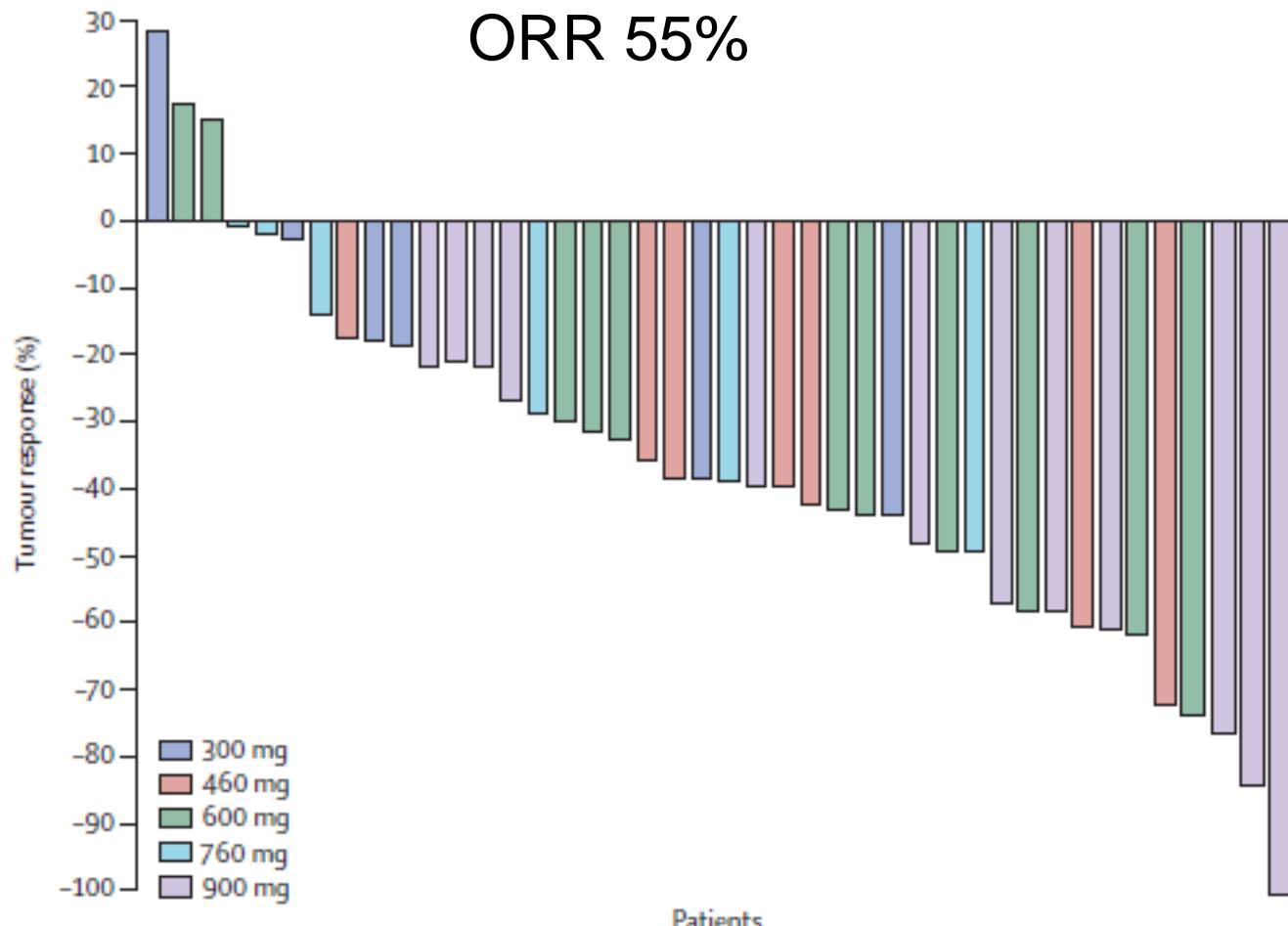


Tyrosine Kinase	IC ₅₀ (nM)
ALK	1.9
ALK F1174L	1.0
ALK R1275Q	3.5
RET	4.8
INSR	550
KDR	1400
ABL	>5000
EGFR	>5000
FGFR2	>5000
HER2	>5000
IGF1R	>5000
JAK1	>5000
MET	>5000

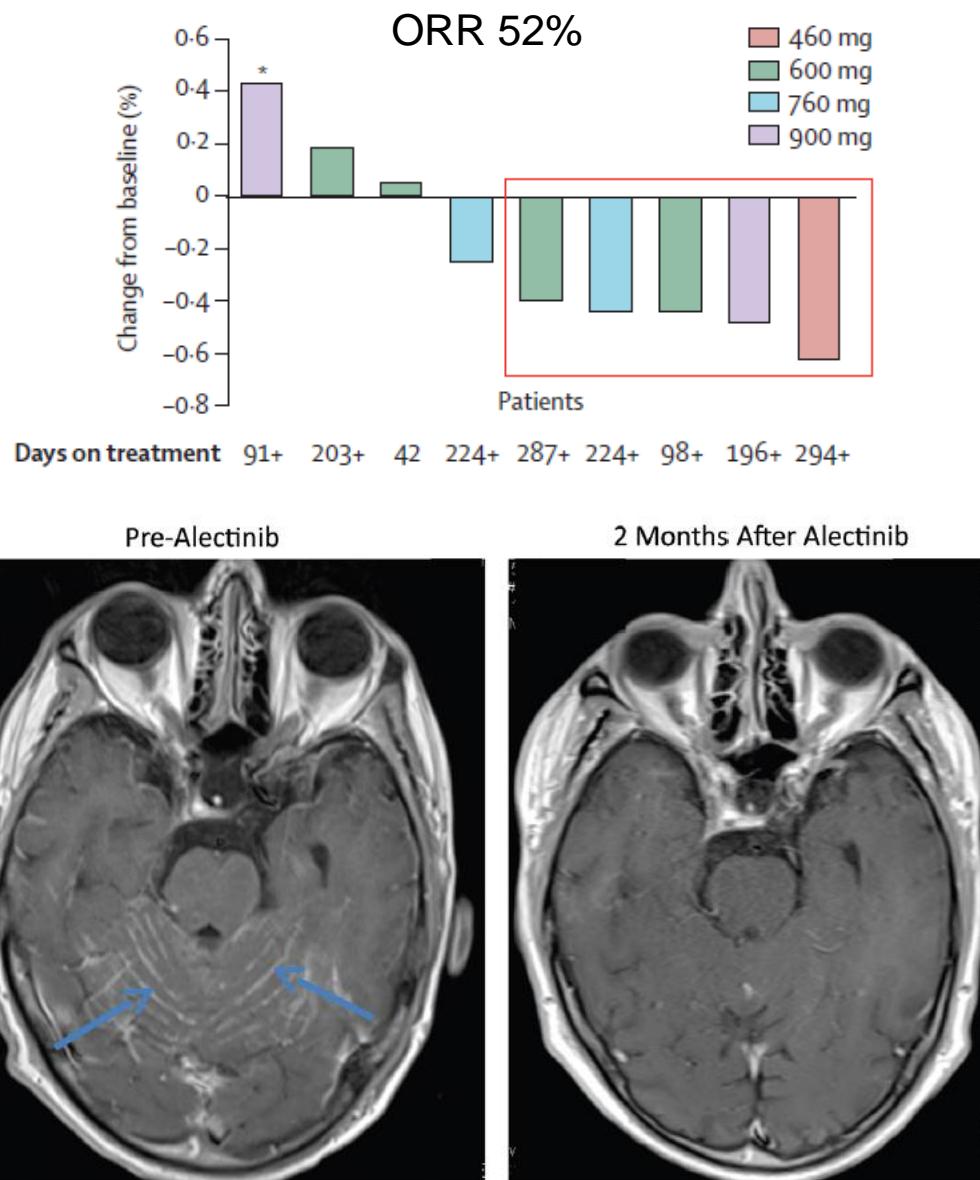
Alectinib in ALK-TKI Naïve Patients



Activity of Alectinib in Crizotinib-Resistant Disease



Activity of Alectinib in the CNS



Activity of Next-Generation ALK Inhibitors in Crizotinib-Resistant Disease

	Ceritinib	Alectinib	AP26113
Sponsor	Novartis	Roche	Ariad
Sample Size	163	44	65
ORR	55%	55%	69%
Confirmed/Unconfirmed Responses	Confirmed	Confirmed & Unconfirmed	Confirmed & Unconfirmed
Median PFS	6.93 months	-	47.3 weeks

Resistance to Next Generation ALK Inhibitors

Patient ID	<i>EML4-ALK</i> sequence at crizotinib resistance
MGH011	S1206Y
MGH015	WT
MGH023	WT
MGH034	WT
MGH049	WT
MGH051	WT
MGH057	N/A
MGH061	WT
JFCR013	N/A
JFCR021	G1269A (right lung)

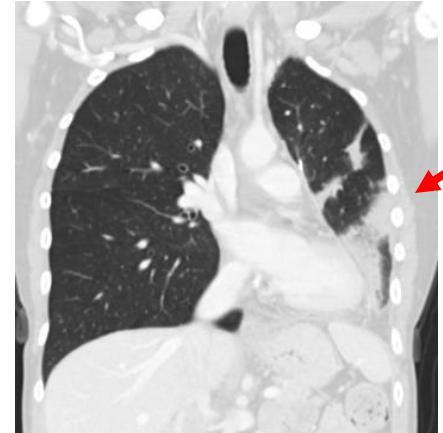
Evolution of ALK TKI Resistance



Baseline



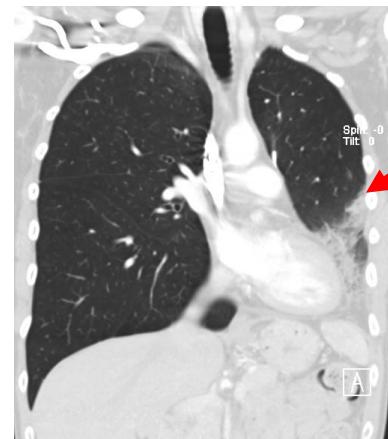
After 8 weeks of crizotinib



After 34 months of crizotinib
S1206Y

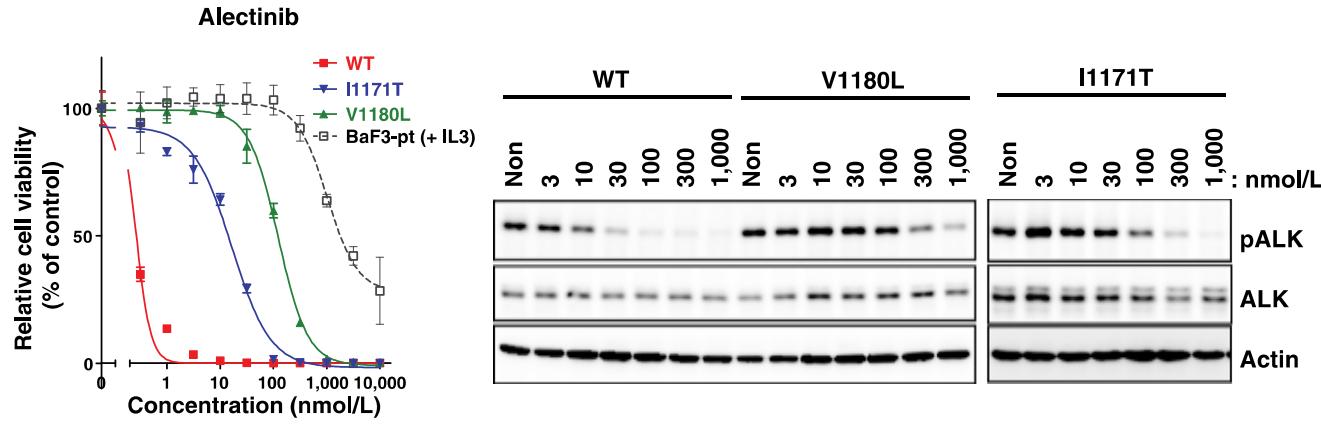


After 12 weeks of ceritinib



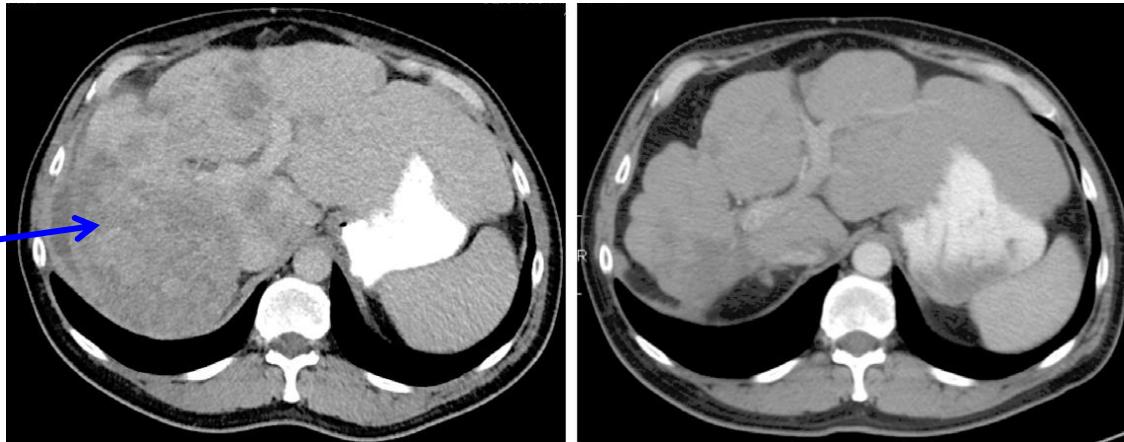
After 15 months of ceritinib
G1202R

ALK Resistance Mutations May Differ Across Next Generation ALK Inhibitors



MGH056

I1171T



After alectinib
(Pre-ceritinib)

On ceritinib
(best response to ceritinib)

Evolution of ALK Resistance Mutations

Crizotinib

1151Tins

L1152R

C1156Y

F1174V/L

L1196M

G1202R

D1203N

S1206Y

G1269A

Ceritinib

F1174V/C

D1203N

Alectinib

G1202R

I1171T
V1180L

Additional Mechanisms of ALK TKI Resistance: Bypass Signaling

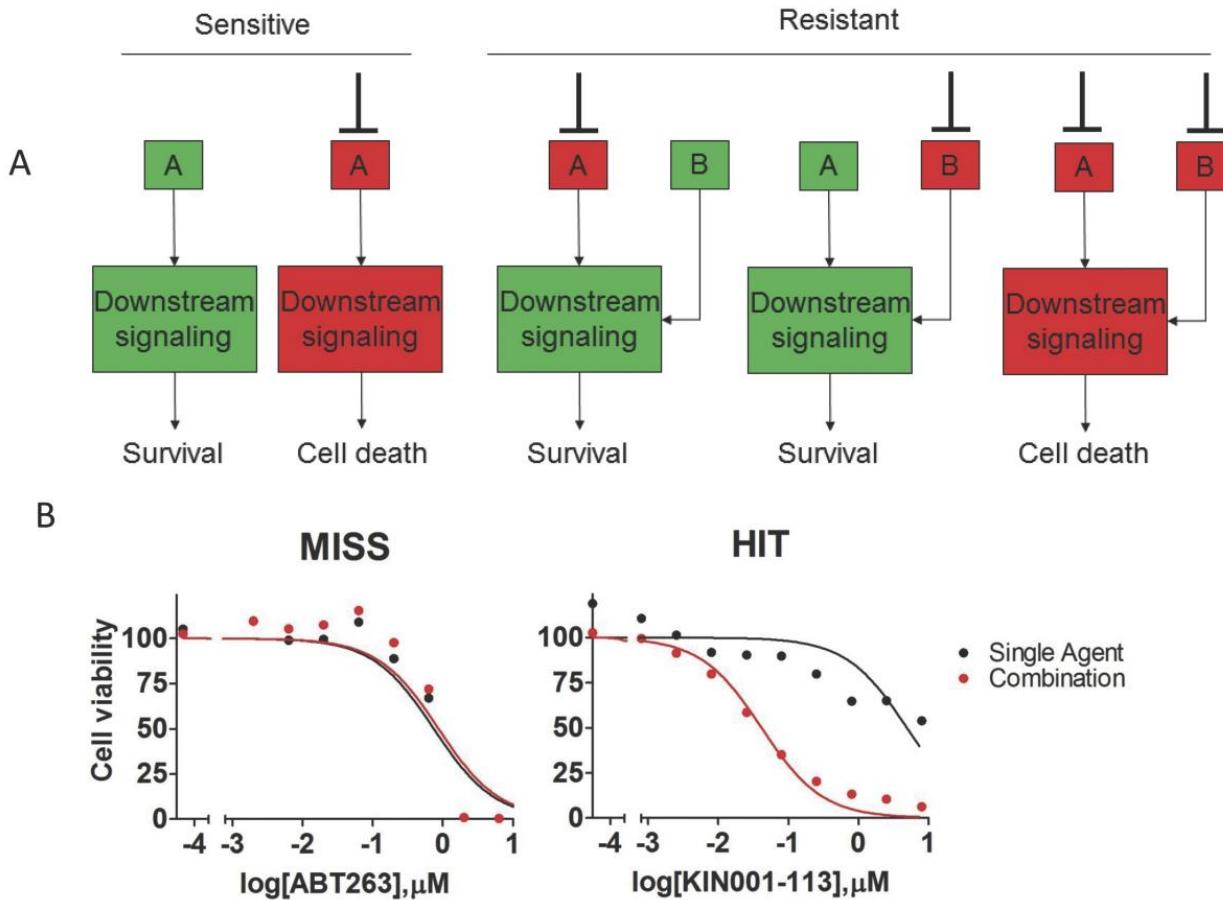
ALK TKI	Bypass Pathway	Reference(s)
Crizotinib	EGFR Activation	<i>Katayama et al. 2012</i> <i>Doebele et al. 2012</i> <i>Sasaki et al. 2011</i>
	<i>cKIT</i> Amplification	<i>Katayama et al. 2012</i>
	IGF-1R Signaling	<i>Lovly et al. 2014</i>
	SRC Signaling	<i>Crystal et al. 2014</i>
Crizotinib/Ceritinib	MAPK Pathway Activation	<i>Doebele et al. 2012</i> <i>Crystal et al. 2014</i>
Alectinib	<i>MET</i> Amplification	<i>Gouji et al. 2014</i>



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Targeting Bypass Signaling Pathways



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Targeting Bypass Signaling Pathways

A

EGFR

ALK

HER2

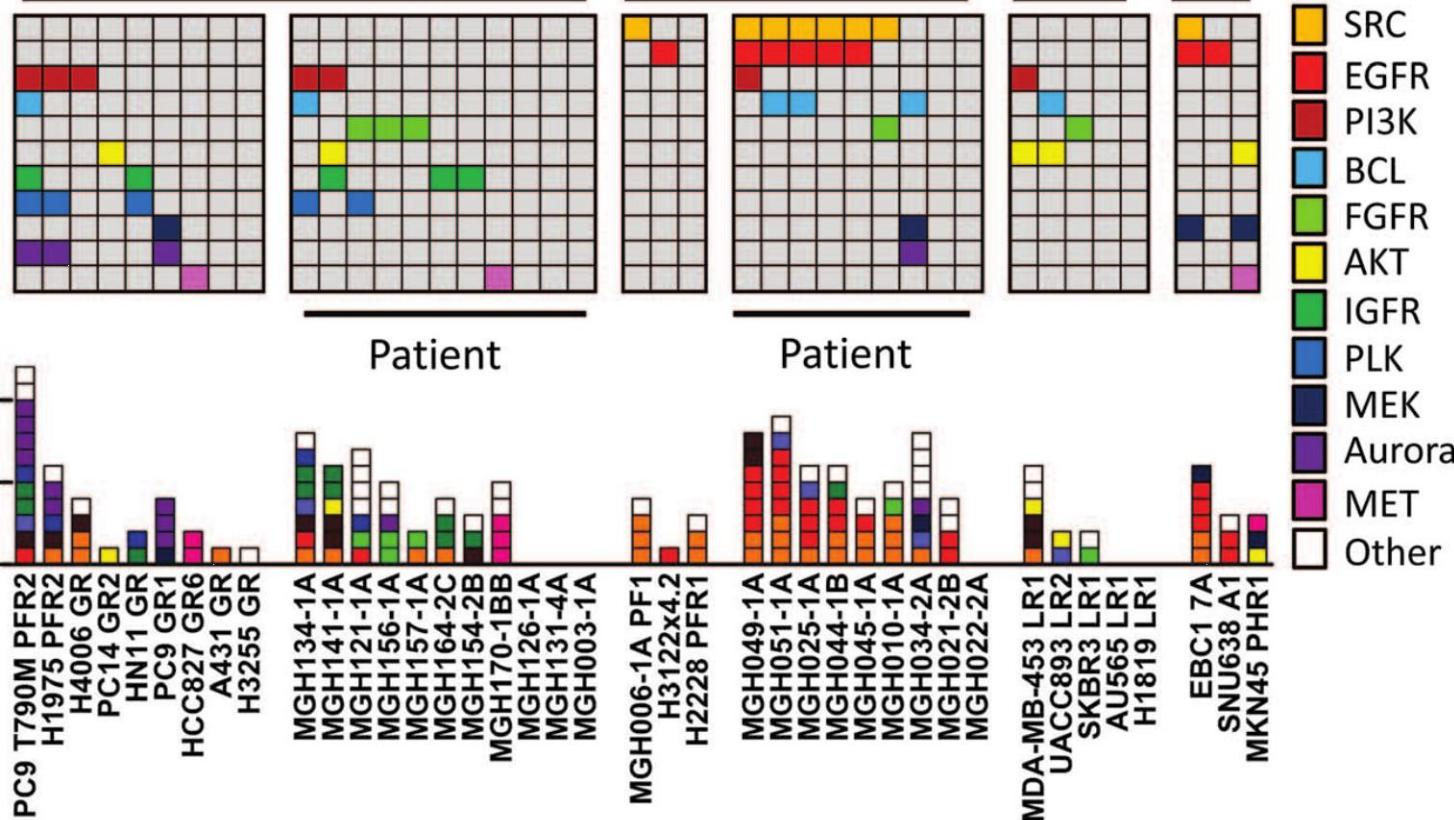
MET

B

Patient

Patient

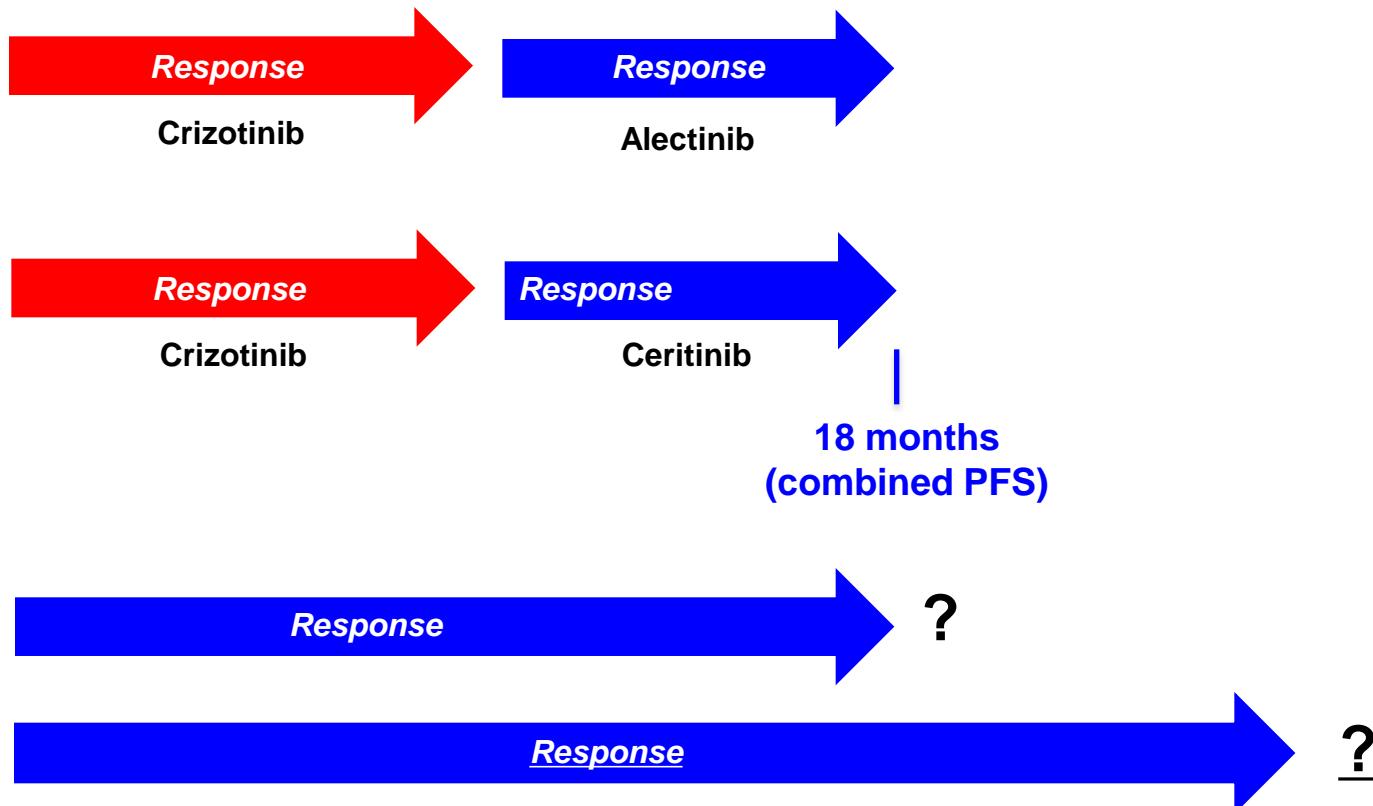
Number of drugs



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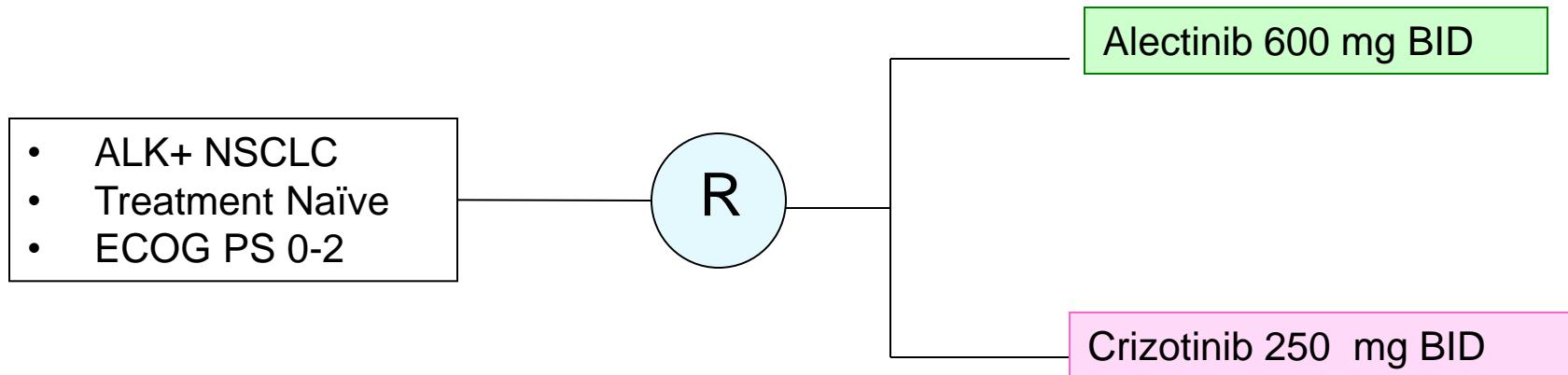
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Sequencing of ALK TKIs Moving Forward?



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ALEX Study (NCT02075840)



Primary Endpoint:

- PFS

Secondary Endpoints:

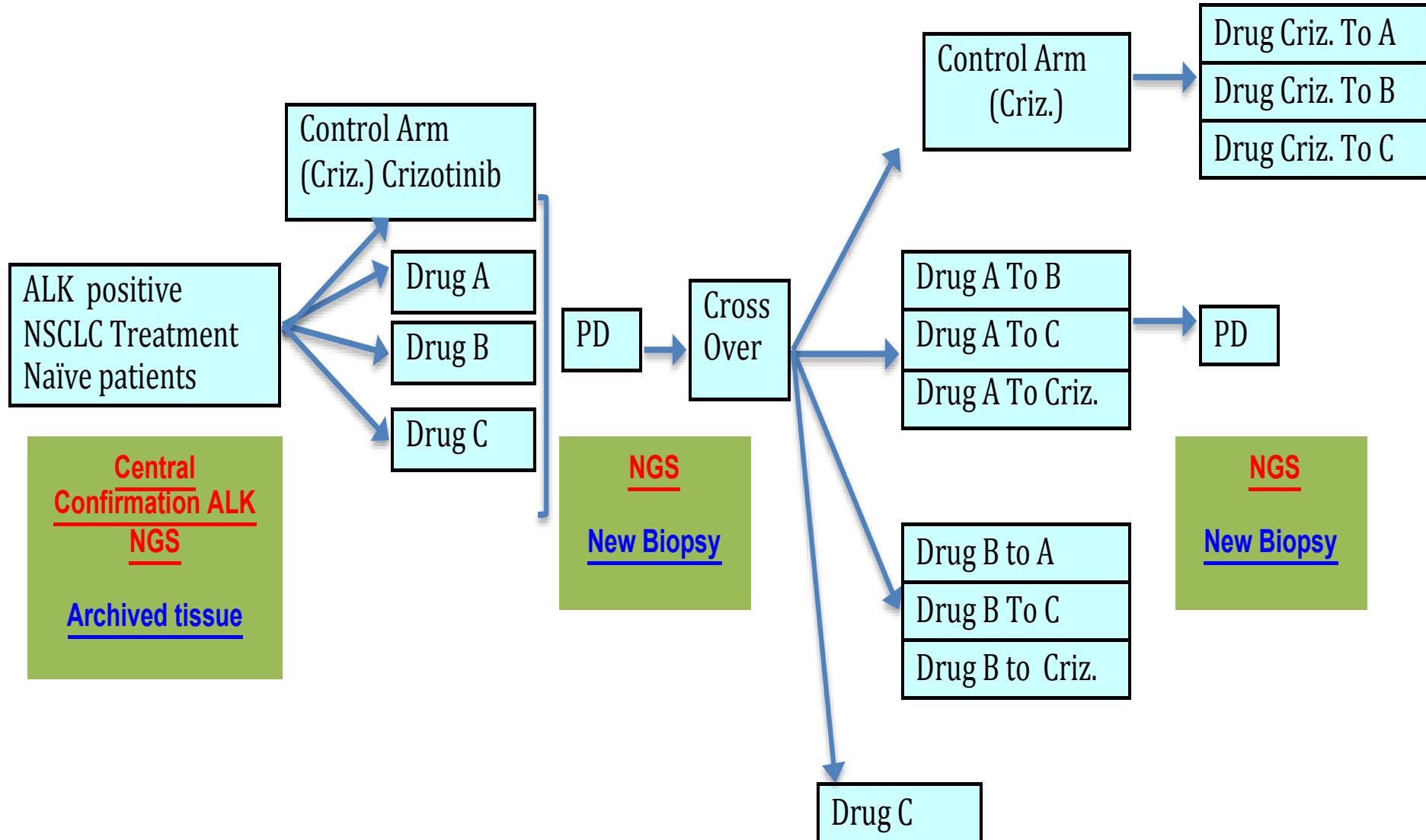
- ORR
- OS
- Time to CNS Progression
- Quality of Life Measures



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NCI ALK MP



Conclusions

- Mechanisms of resistance to crizotinib include: PK failure (e.g., CNS), *ALK* amplification, *ALK* resistance mutations, and bypass signaling.
- Next-generation *ALK* inhibitors have shown promising anti-tumor activity in early phase studies.
- *ALK* resistance mutations confer differential sensitivities to next-generation *ALK* inhibitors.
- Certain *ALK* resistance mutations (e.g., G1202R) confer high levels of resistance to available *ALK* TKIs.
- Questions remain regarding the optimal sequencing of *ALK* inhibitors.

Acknowledgements

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