

Phase 1b Study of AMG 757, a Half-Life Extended Bispecific T-Cell Engager (HLE BiTE[®]) Immunology Therapy Targeting DLL3, In De Novo Or Treatment-Emergent Neuroendocrine Prostate Cancer (NEPC)

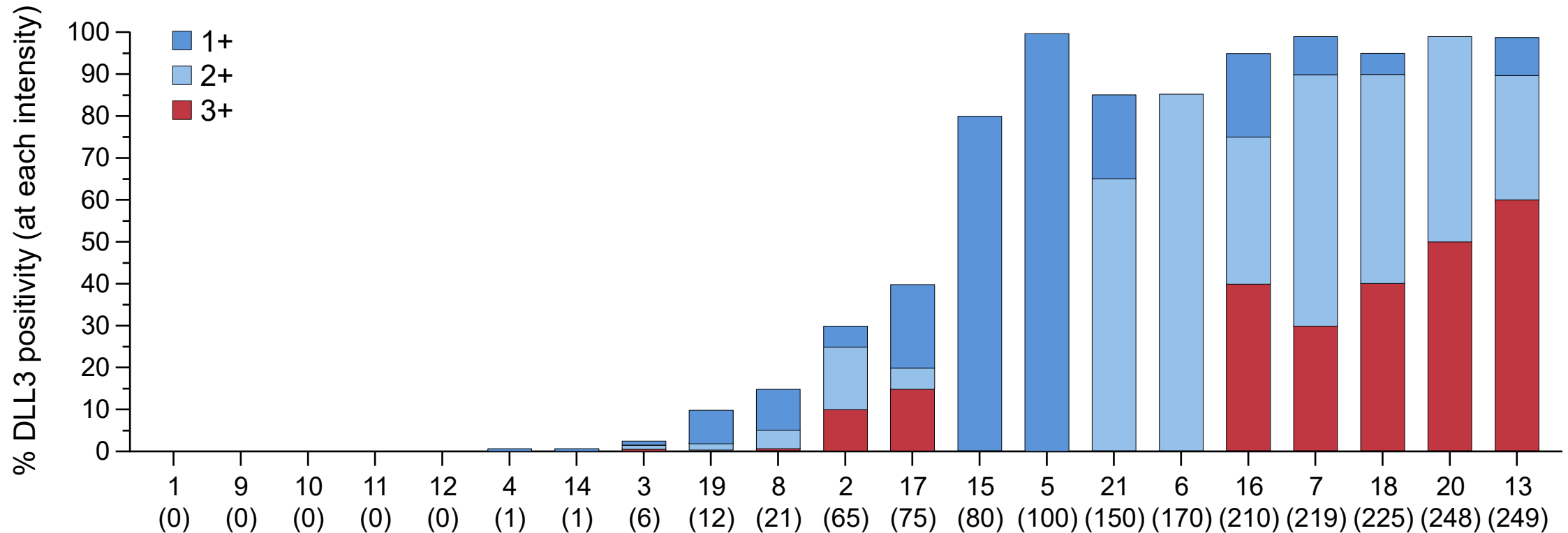
Background

- De novo neuroendocrine prostate cancer (NEPC) is a rare aggressive variant form of prostate cancer with poor prognosis and no standard treatment approach^{1,2}
 - Treatment-emergent NEPC is usually characterized by histological transformation from adenocarcinoma to a high-grade neuroendocrine tumor, and may develop in 15%–20% of patients with metastatic castration-resistant prostate cancer (mCRPC)²
- Delta-like ligand 3 (DLL3), an inhibitory Notch ligand, has been shown to be highly expressed on NEPC tumors (~77%) and minimally expressed on normal tissue, making it a compelling therapeutic target^{3,4}

1. Wang HT, et al. *J Clin Oncol*. 2014;32:3383-3390.
2. Aggarwal R, et al. *J Clin Oncol*. 2018;36:2492-2503.
3. Tsai H, et al. *BMC Cancer*. 2017;17:759.
4. Puca L, et al. *Sci Transl Med*. 2019;11:eaav0891.

DLL3 is Prevalent in 76% of NEPC Tumor Samples

- 16 of 21 NEPC tumors (76%) stained positive for DLL3, with a median (range) *H*-score of 90 (1–249)
 - Median % DLL3 positive tumor cells: 83%



H-score, provides a semiquantitative assessment of DLL3 and combines percentage of cells expressing DLL3 (0–100) and the intensity of the signal range (0–3, with 0=no to 3=strong straining), giving a possible *H*-score range of 0–300

NEPC Tissues Express DLL3 mRNA and Protein

- DLL3 expression was observed in NEPC tumor and tissue sections immunostained with an anti-DLL3 antibody

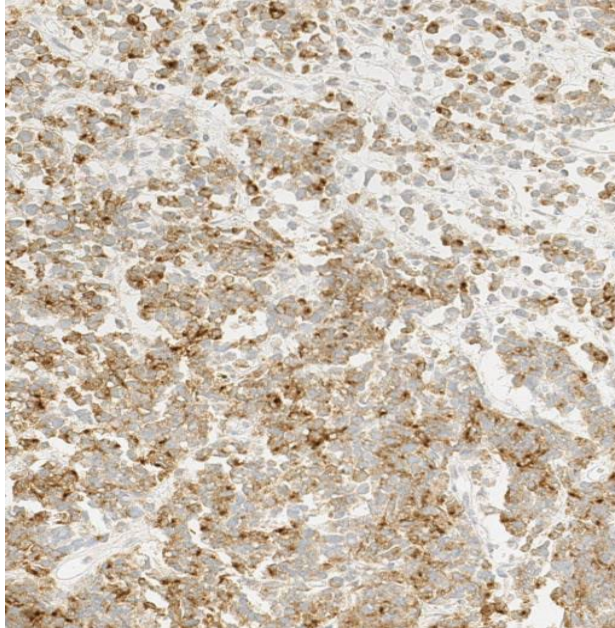
Adenocarcinoma with neuroendocrine components (Gleason score 5+5)

% Positive Cells

Intensity/H-Score*

80

65



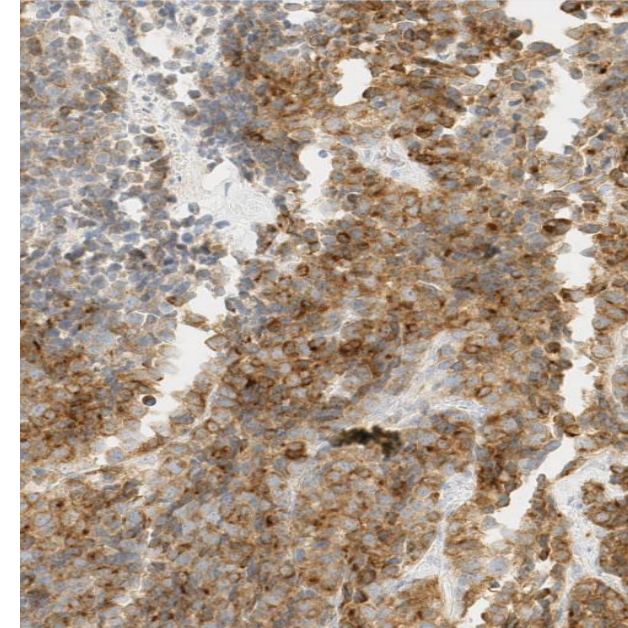
Small cell carcinoma of the prostate

% Positive Cells

Intensity/H-Score*

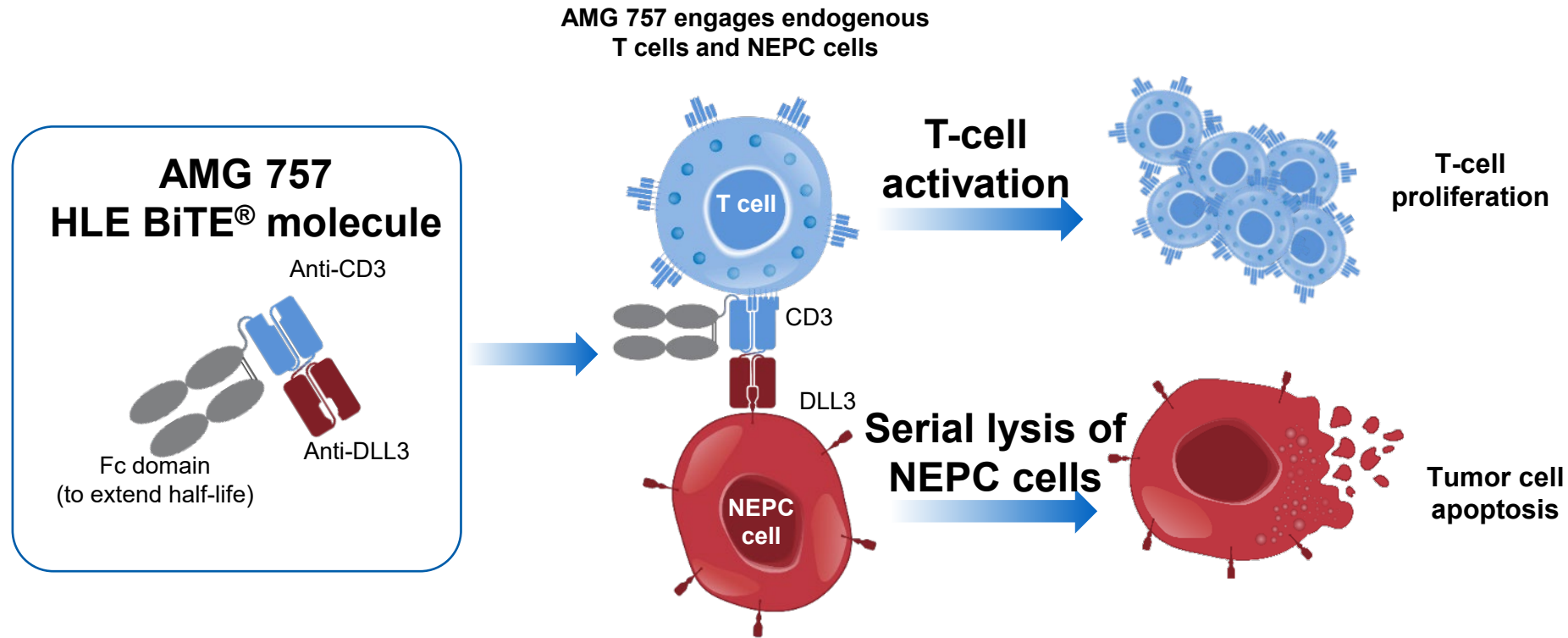
90

150



H-score, provides a semiquantitative assessment of DLL3 and combines percentage of cells expressing DLL3 (0–100) and the intensity of the signal range (0–3, with 0=no to 3=strong staining), giving a possible H-score range of 0–300

Figure 3. AMG 757: A HLE BiTE[®] Therapy Targeting DLL3



CD, cluster of differentiation; DLL3, delta-like ligand 3; Fc, fragment crystallizable domain; HLE BiTE, half-life extended bispecific T-cell engager; NEPC, neuroendocrine prostate cancer.

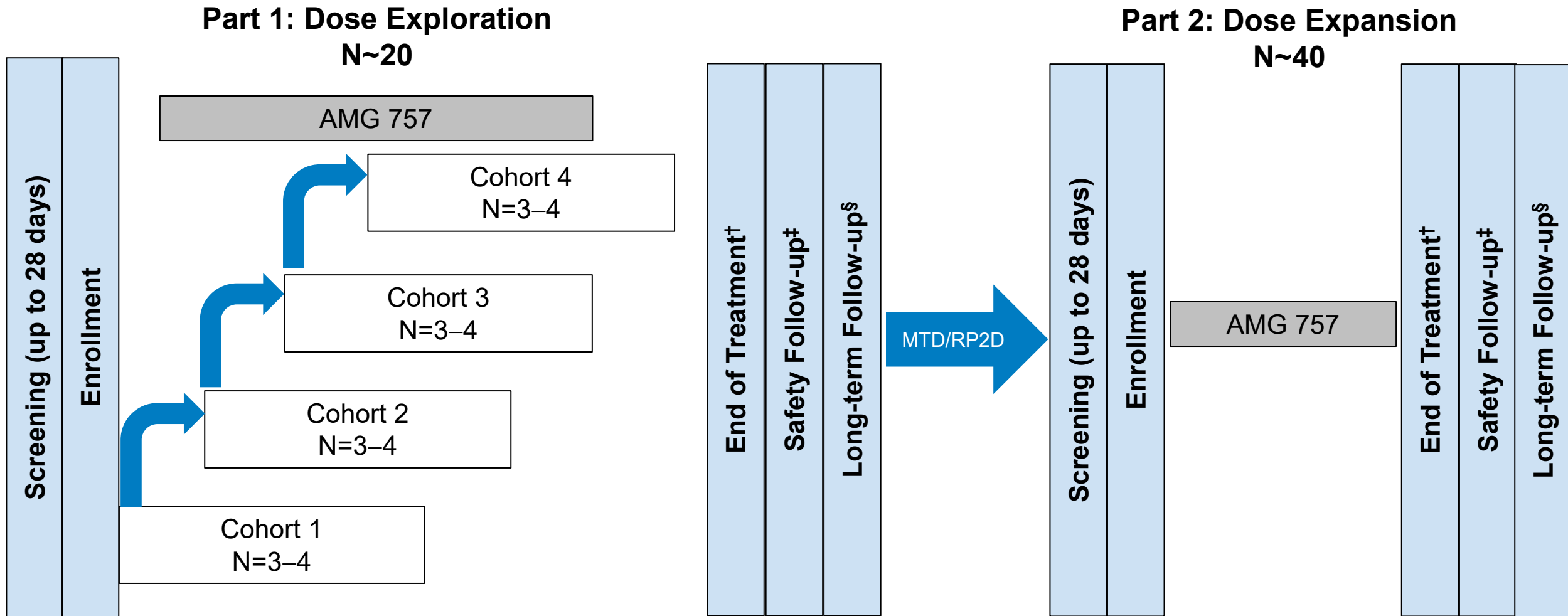
AMG 757: HLE BiTE Therapy Targeting DLL3

- AMG 757 is a HLE BiTE[®] immuno-oncology therapy designed to redirect cytotoxic T cells to tumor cells by binding to DLL3 on cancer cells and CD3 on T cells
- AMG 757 induces T-cell dependent lysis of DLL3-neuroendocrine tumor cell lines, including NEPC cells
- Pre-clinical activity of AMG 757 in NEPC patient-derived models
- Preliminary results of an ongoing first-in-human study suggest that AMG 757 is safe and has anti-tumor activity in patients with small cell lung cancer (SCLC; NCT03319940)

Study Overview

- NCT04702737 is an open-label, phase 1b study evaluating AMG 757 monotherapy in patients with metastatic NEPC that is de novo or treatment-emergent
 - The study consist of two parts: dose exploration and dose expansion

Figure 4. Phase 1b AMG 757 in NEPC Study Design



[†]Within 14 days after the last dose; [‡]approximately 35±5 days after the end of the last dose; [§]every 3 months up to 3 years from the first dose for all patients who have not withdrawn consent
MTD, maximum tolerated dose; RP2D, recommended phase 2 dose

Key Eligibility Criteria



Adult ≥ 18 years of age



Metastatic de novo or treatment-emergent NEPC

- Histological diagnosis of small cell NEPC, histologic evidence of prostate cancer with neuroendocrine differentiation by IHC, and/or ≥ 2 alterations in Tp53, RB1, and/or PTEN by immunohistochemistry or genomic analyses of baseline tumor tissue or circulating tumor DNA, **with**
- Adequate organ function, and no untreated/symptomatic brain metastases



Progressed on at least 1 line of prior systemic treatment



Measurable disease per RECIST 1.1 criteria with PCWG3 modifications



Eastern Cooperative Oncology Group performance status of ≤ 2

Objectives

- **Primary Objectives**

- Evaluate the safety and tolerability of AMG 757 monotherapy
- Determine the maximum tolerated dose or recommended phase 2 dose of AMG 757

- **Secondary Objectives**

- Evaluate antitumor activity (ie, objective response, duration of response, progression-free survival, overall response) of AMG 757
- Characterize the pharmacokinetics of AMG 757

- **Correlative Analyses:**

- Association between baseline tumor genomic and RNA expression profile with clinical outcomes including DLL3
- Association between intra-tumoral and peripheral immune cell subsets with outcomes
- 5-hydroxymethylcytosine (5-hmc) profiling of serial ctDNA samples

Conclusion

- The differential expression profile of DLL3 on NEPC tumors versus normal tissue makes it a compelling therapeutic target
- Limited standard of care treatment options currently available for this high risk aggressive subset of prostate cancer
- AMG 757 is a HLE BiTE[®] immuno-oncology therapy designed to engage CD3-positive T cells to DLL3-positive tumor cells and induce T cell activation and proliferation and T cell-dependent tumor lysis
- AMG 757 demonstrates encouraging preliminary activity in SCLC, with confirmed objective response rate of 20% in a heavily pre-treated population
- NCT04702737, a phase 1b study evaluating AMG 757 in patients with NEPC, is planning to open to accrual in 2H 2021

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