

INTRODUCTION

- Elderly patients with acute myeloid leukemia (AML) are ineligible for standard intensive chemotherapy. Thus, their clinical management remains challenging.
- As alternative strategies, less-intensive regimens with hypomethylating agents (HMAs) alone or in combination with the BCL-2 inhibitor venetoclax (VCX) are currently being used in these unfit patients.
- Due to low response rates and adverse events of conventional HMAs, novel HMAs that elicit enhanced efficacy and reduce mortality rates are required.
- A novel HMA, 5-aza-4'-thio-2'-deoxycytidine (NTX-301), showed a promising preliminary result for the safety and efficacy.

AIM

- The antileukemic activity, mechanisms of action (MoAs), and predictive biomarkers of NTX-301 are not yet understood.
- We aim to thoroughly investigate the experimental and preclinical efficacy of NTX-301 through comparative analyses with conventional agents decitabine (DAC) and azacitidine (AZA), which have been well defined as therapeutics for AML.

METHOD

- To comprehensively evaluate the anticancer activity of NTX-301, we examined the viability of 200 cancer cell lines (CCLs) upon NTX-301 treatment based on two sensitivity metrics: the IC_{50} and the area under the dose-response curve (AUC).
- To assess the antileukemic activity of NTX-301, we performed in vitro cell-based phenotypic assays, including assays to analyze cell viability, cell cycle, apoptosis, and AML cell differentiation.
- We evaluated the preclinical efficacy of NTX-301 as monotherapy and in combination with VCX by establishing six different mouse models encompassing both systemic and subcutaneous xenografts.
- To identify the MoAs underlying the antileukemic activity and the predictive biomarkers of NTX-301, we analyzed multiomics data.

A STUDY ON THE PRECLINICAL EFFICACY, UNDERLYING MECHANISMS, AND SENSITIVITY MARKERS OF A NOVEL HYPOMETHYLATING AGENT NTX-301 IN ACUTE MYELOID LEUKEMIA

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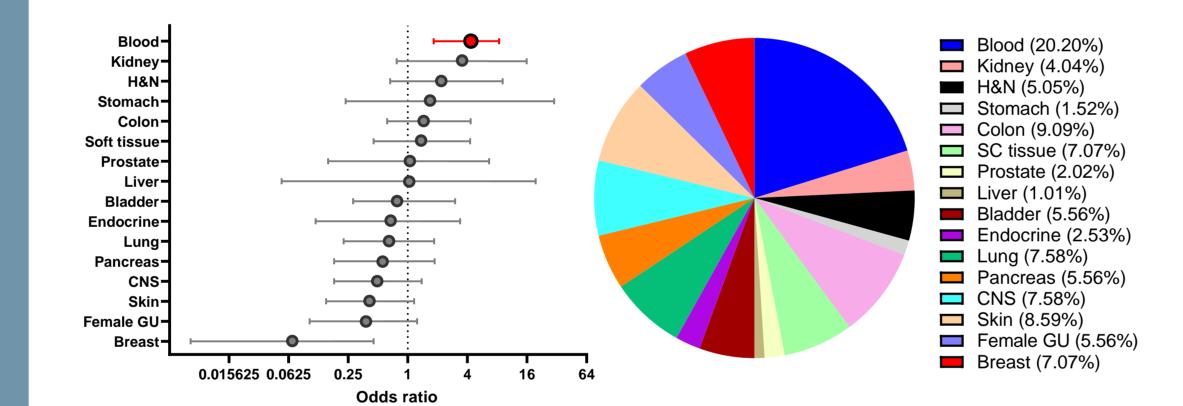
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RESULTS

Sensitivity profiling of NTX-301 across 199 cancer cell lines (CCLs)

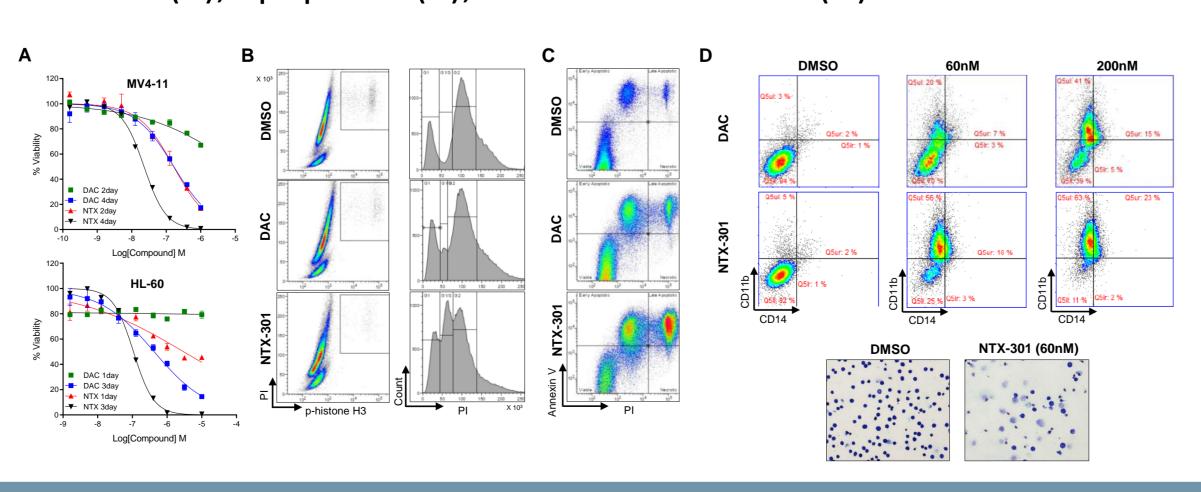
- Consistent with the current use of HMAs as therapeutics for hematologic malignancies, NTX-301 displayed skewed sensitivity toward CCLs of hematopoietic origin.
- Compared with the median AUC of hematopoietic CCLs, NTX-301 achieved higher efficacy in 21.3% of solid CCLs, whereas DAC achieved higher efficacy in only 0.89% of solid CCLs.
- Thus, sensitivity profiling revealed that NTX-301 not only primarily sensitizes hematologic malignancies but also has better efficacy than conventional HMAs against solid cancers.



Comparative analysis reveals the superior antileukemic activity of NTX-301

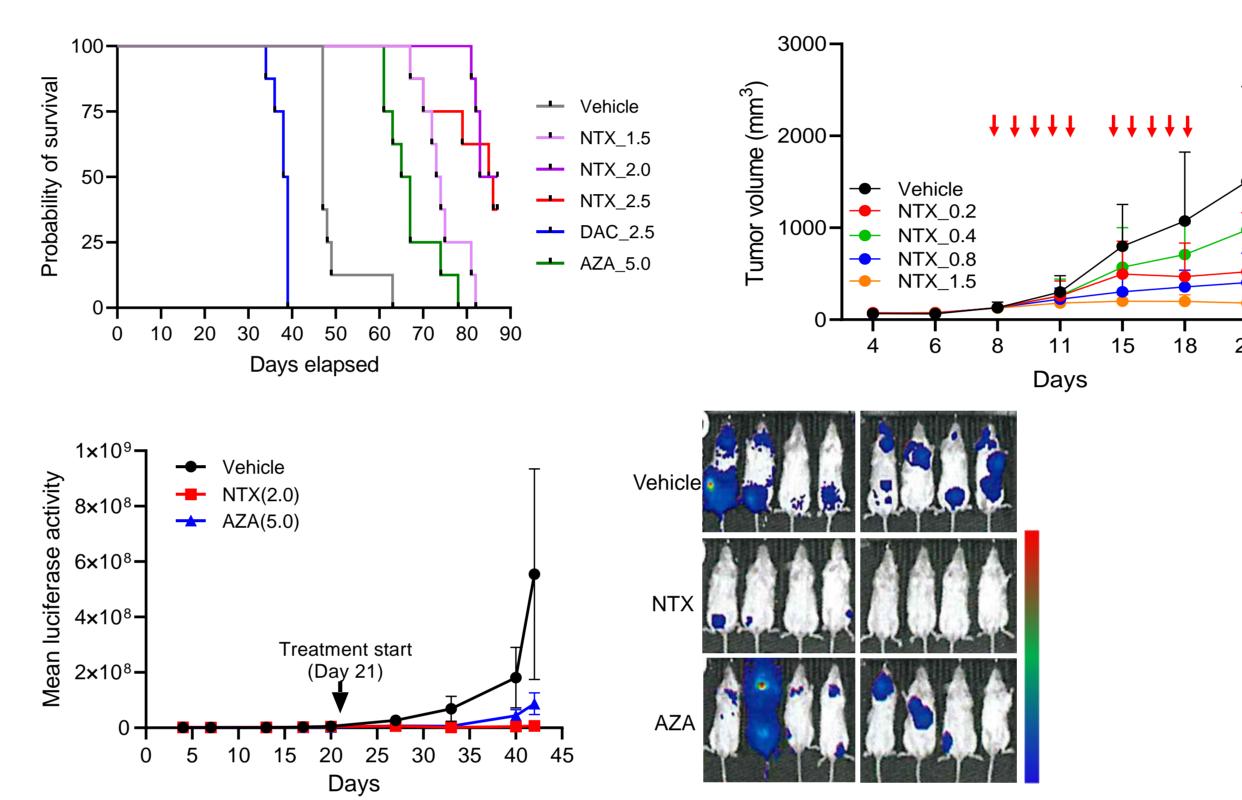
In vitro cell-based assays

■ The superior antileukemic activity of NTX-301 was attributed to its more effective induction of cytotoxicity (A), cell cycle arrest(B), apoptosis (C), and differentiation (D).



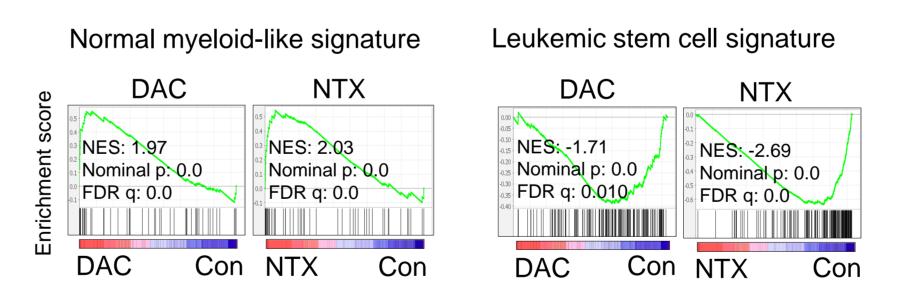
In vivo mouse studies

 Preclinical studies demonstrated the improved antileukemic activity, tolerability, and survival outcomes of NTX-301.

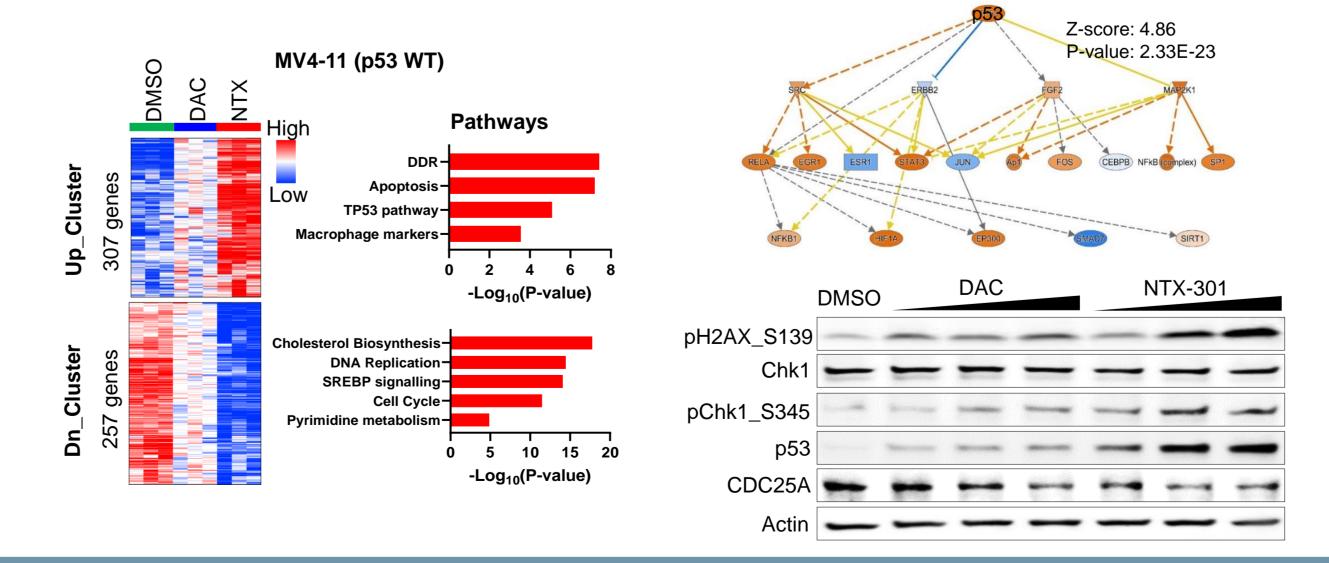


Transcriptome analysis reveals the antileukemic MoAs of NTX-301

 NTX-301 promoted greater transcriptional reprogramming toward a normal myeloid-like signature, accompanied by stronger suppression of the leukemic stem cell signature.

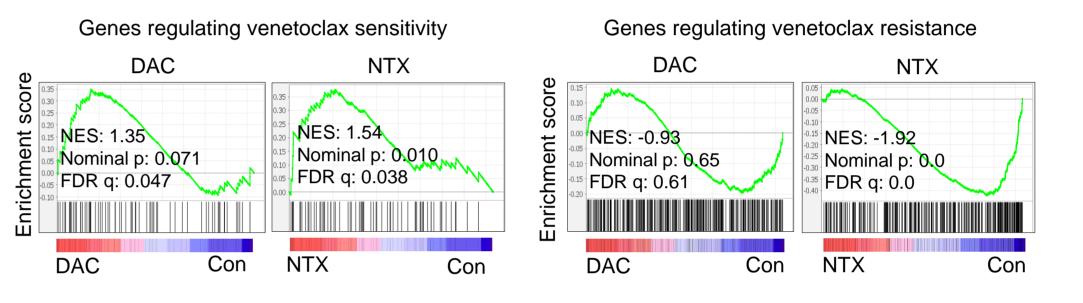


 NTX-301 activated biological processes such as the DNA damage response (DDR), the p53 pathway, the immune response, and apoptosis.

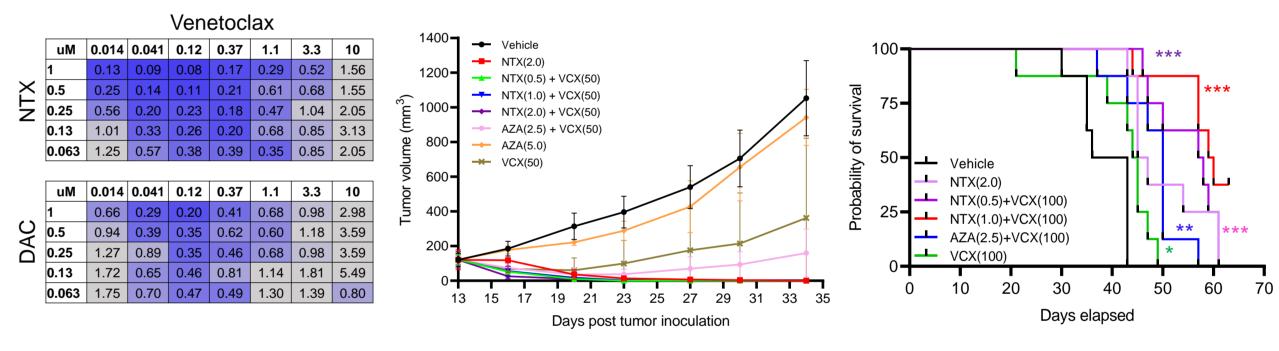


Clinical benefits of the antileukemic MoAs of NTX-301 in combination with the BCL-2 inhibitor venetoclax

NTX-301 triggered more marked transcriptional reprogramming toward sensitivity to VCX than did DAC; it significantly up- and downregulated genes driving sensitivity and resistance, respectively, thus priming AML cells for higher sensitivity.

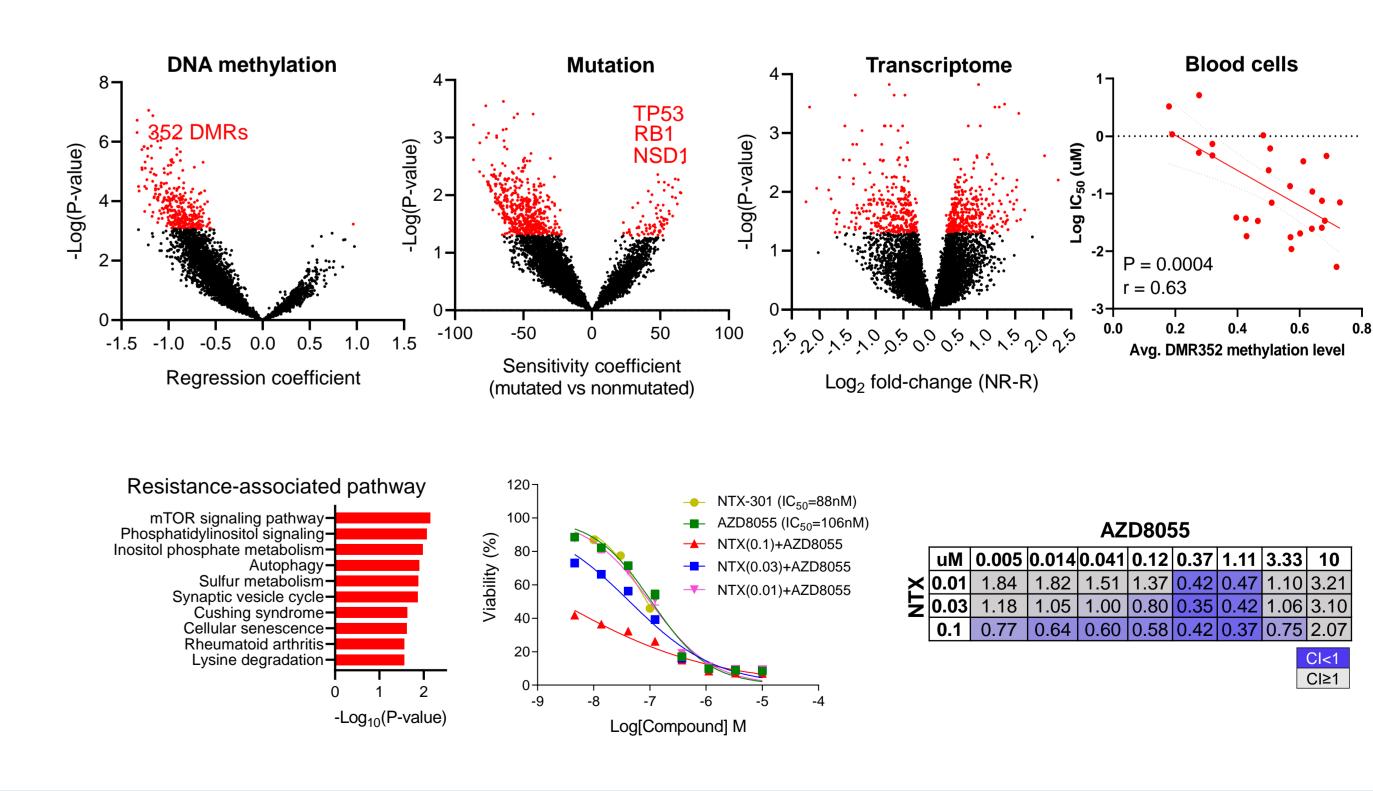


■ The combination of NTX-301+VCX resulted in a combination index (CI) implying greater synergy than DAC+VCX and achieved complete tumor remission and prolonged survival.



❖ Predictive biomarkers associated with sensitivity/resistance to NTX-301

• Integrative analysis of multiomics data and sensitivity profiles in 199 CCLs revealed a methylome-based marker DMR352, mutations frequently occurring in nonresponders in three genes, TP53, RB1, and NSD1, and mTOR-driven intrinsic resistance.



CONCLUSION

- These findings highlight the improved therapeutic index of NTX-301 and the underlying mechanisms and predictive biomarkers, providing a rationale for its clinical development.
- Our study will enhance our understanding of NTX-301 and contribute to patient stratification during clinical development, thus guiding a novel therapeutic option for elderly patients with AML.