

LNG-451 (BLU-451) is a potent, CNS-penetrant, wild-type EGFR sparing inhibitor of EGFR exon 20 insertion mutations

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Background

- Epithelial growth factor receptor (*EGFR*) exon 20 insertions (ex20ins) are oncogenic driver mutations that constitutively upregulate kinase activity, are the third most common type of activating *EGFR* mutation in patients with lung cancer, and are not potentially targeted by many inhibitors of common activation mutations such as L858R and exon 19 mutations¹
- EGFR* ex20ins are in-frame insertions of one to seven amino acids in the α C helix, with the three most prevalent insertions V769_D770insASV, D770_N771insSVD, and H773_V774insNPH accounting for half of the cases¹
- EGFR* ex20ins alter the *EGFR* active site in a manner which renders the first three generations of *EGFR* inhibitors generally ineffective³
- While there are approved therapies such as mobocertinib and amivantamab, and others in clinical development, none have demonstrated meaningful central nervous system (CNS) activity, and can be associated with treatment-limiting adverse events, including wild-type (WT) *EGFR*-mediated toxicities^{4,5}
- BLU-451 (formerly known as LNG-451) was designed as a covalent inhibitor to potentially inhibit *EGFR* ex20ins mutations, spare WT *EGFR*, and be CNS penetrant

Methods

- BLU-451 cellular activity was tested by cell viability assays in both tumor and Ba/F3 engineered cell lines expressing *EGFR* mutations as well as cell lines dependent on WT *EGFR*
- Kinome engagement was assessed using broad panels of ligand binding assays as well as radiometric enzymatic assays
- In an *EGFR* ex20ins-driven cell line-derived xenograft (CDX) tumor model, pharmacokinetics/pharmacodynamics (PK/PD) analysis of BLU-451 and comparators were performed in skin, and large intestine tissue
- The *in vivo* antitumor activity of BLU-451 was assessed in a CDX tumor model using Ba/F3 cells expressing *EGFR* ex20ins, and an *EGFR* ex20ins patient-derived xenograft (PDX) tumor model

Results

- In cell viability assays, BLU-451 had similar potency to mobocertinib against *EGFR* ex20ins and greater potency than osimertinib (Table 1)
- In WT *EGFR* dependent cell viability assays, BLU-451 was less potent than mobocertinib and similar in potency to osimertinib (Table 1)
- BLU-451 was potent against uncommon oncogenic point mutations (e.g., G719S, L861Q; Table 1)

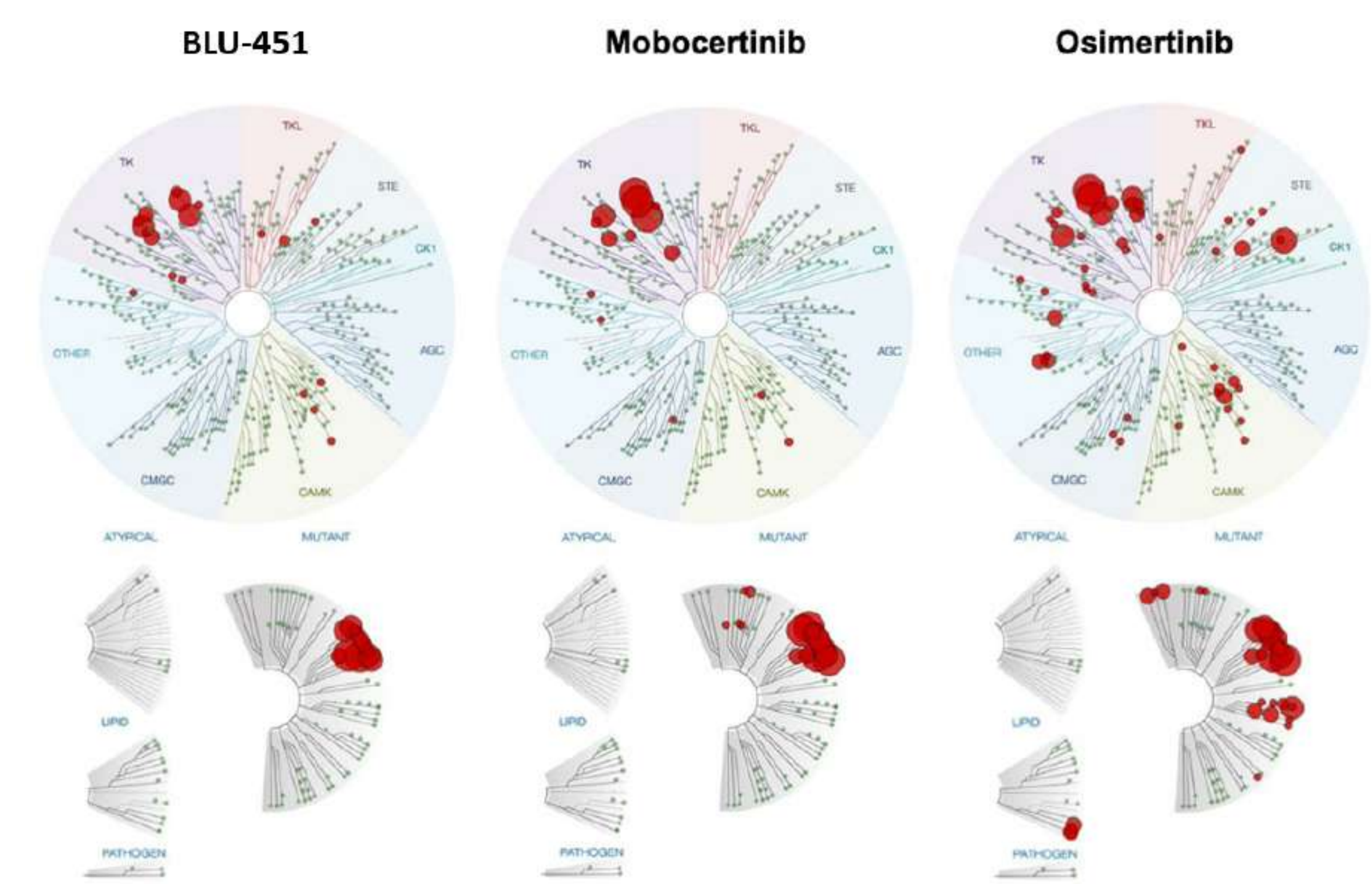
Table 1: BLU-451 spared WT *EGFR* and inhibited *EGFR* ex20ins and other oncogenic mutations

Construct	Cell line	BLU-451	Osimertinib	Mobocertinib
IC₅₀ values (nM) for <i>EGFR</i> exon 20				
SVD (D770_N771insSVD)	Ba/F3	53	268	39
SVD-vendor2 (D770_N771insSVD)	Ba/F3	26	150	13
ASV (V769_D770insASV)	Ba/F3	78	271	39
NPH (H773_V774insNPH)	Ba/F3	75	210	105
FQEA (A763_Y764insFQEA)	Ba/F3	61	122	32
NPG (H770_N771insNPG)	Ba/F3	7	26	3
IC₅₀ values (nM) for WT <i>EGFR</i>				
A431	A431	1660	1003	1,124
<i>EGFR</i> Ba/F3	Ba/F3	1960	982	363
H2073	H2073	921	505	25
IC₅₀ values (nM) for common and uncommon <i>EGFR</i> mutants				
<i>EGFR</i> L861Q	Ba/F3	6	-	19
<i>EGFR</i> G719S	Ba/F3	8	-	7
<i>EGFR</i> G719S/T263P	Ba/F3	11	-	24
<i>EGFR</i> L858R	Ba/F3	3	-	4
Exon 19 Deletion (E746-A750)	PC9	13	14	2

IC₅₀ values for BLU-451 in a LoVo cell line harboring WT *EGFR*/KRAS, and in a Ba/F3 vector control line were 6980 nM and >10000 nM respectively. IC₅₀, half-maximal inhibitory concentration; WT, wildtype. All data from n≥3 measurements.

- In ligand binding assays (Figure 1), BLU-451 (1 μ M) inhibited 1.7% of kinases tested by >90% (7/409). The off-target kinases (e.g., TEC family kinases) had a similarly positioned cysteine to *EGFR*, with the exception of PAK3. BLU-451 was highly selective compared to other *EGFR* inhibitors (e.g., osimertinib)
- In radiometric enzymatic assays run in the presence of 10 μ M ATP, BLU-451 (1 μ M) inhibited 2.2% of kinases by >90% (8/370)

Figure 1: BLU-451 is a highly selective kinase inhibitor



- BLU-451 (10 and 50 mg/kg QD) treatment of HuPrime[®] LU0387 in a PDX model harboring *EGFR* ex20ins (H773-V774insNPH) resulted in marked tumor regression with minimal change in body weight (Figure 2A)
- BLU-451 (10 and 50 mg/kg QD) treatment of a non-small cell lung cancer (NSCLC) LXFE 2478 PDX model harboring *EGFR* ex20ins (V769_D770insASV) resulted in regression with minimal change in body weight (Figure 2B)
- In a Ba/F3 CDX model harboring the *EGFR* ex20ins (V769_D770insASV), BLU-451 was equally effective as mobocertinib. Treatment with mobocertinib led to 17.5% body weight loss (Figure 2C)

Figure 2: Oral daily administration of BLU-451 resulted in tumor regression in NSCLC LU0387 (A) and LXFE 2478 (B) PDX and Ba/F3 subcutaneous CDX tumor models (C) harboring *EGFR* ex20ins mutations

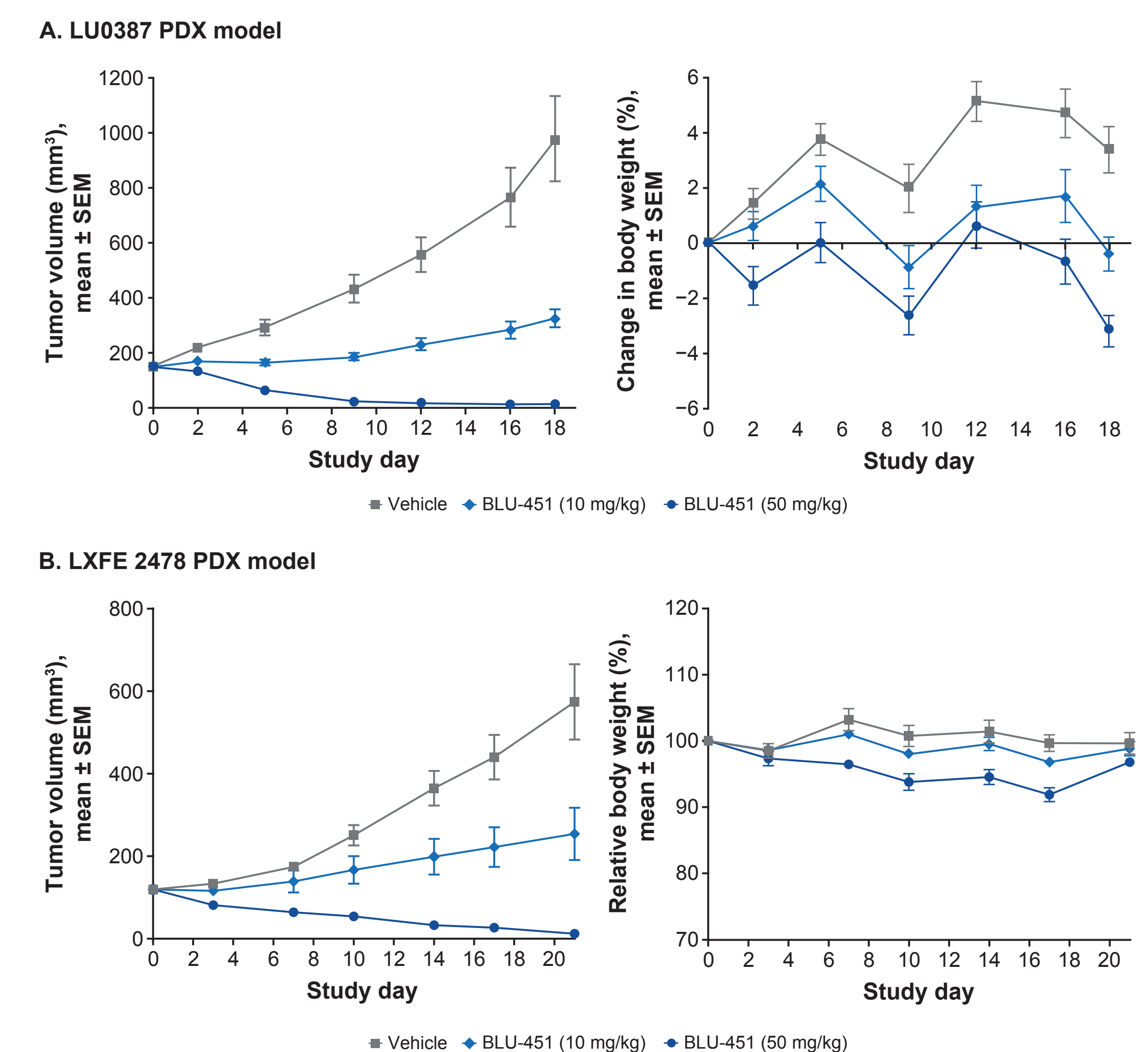
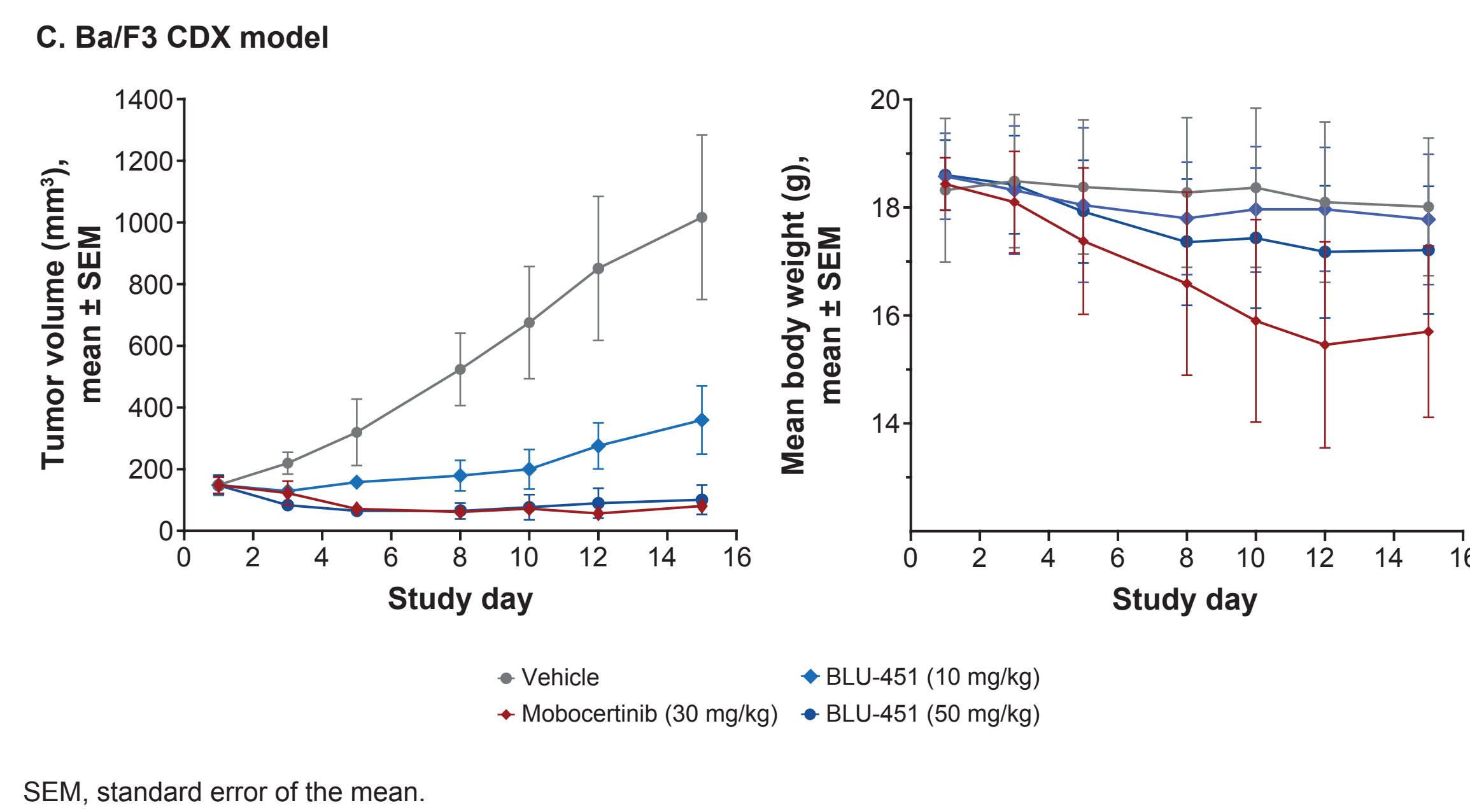


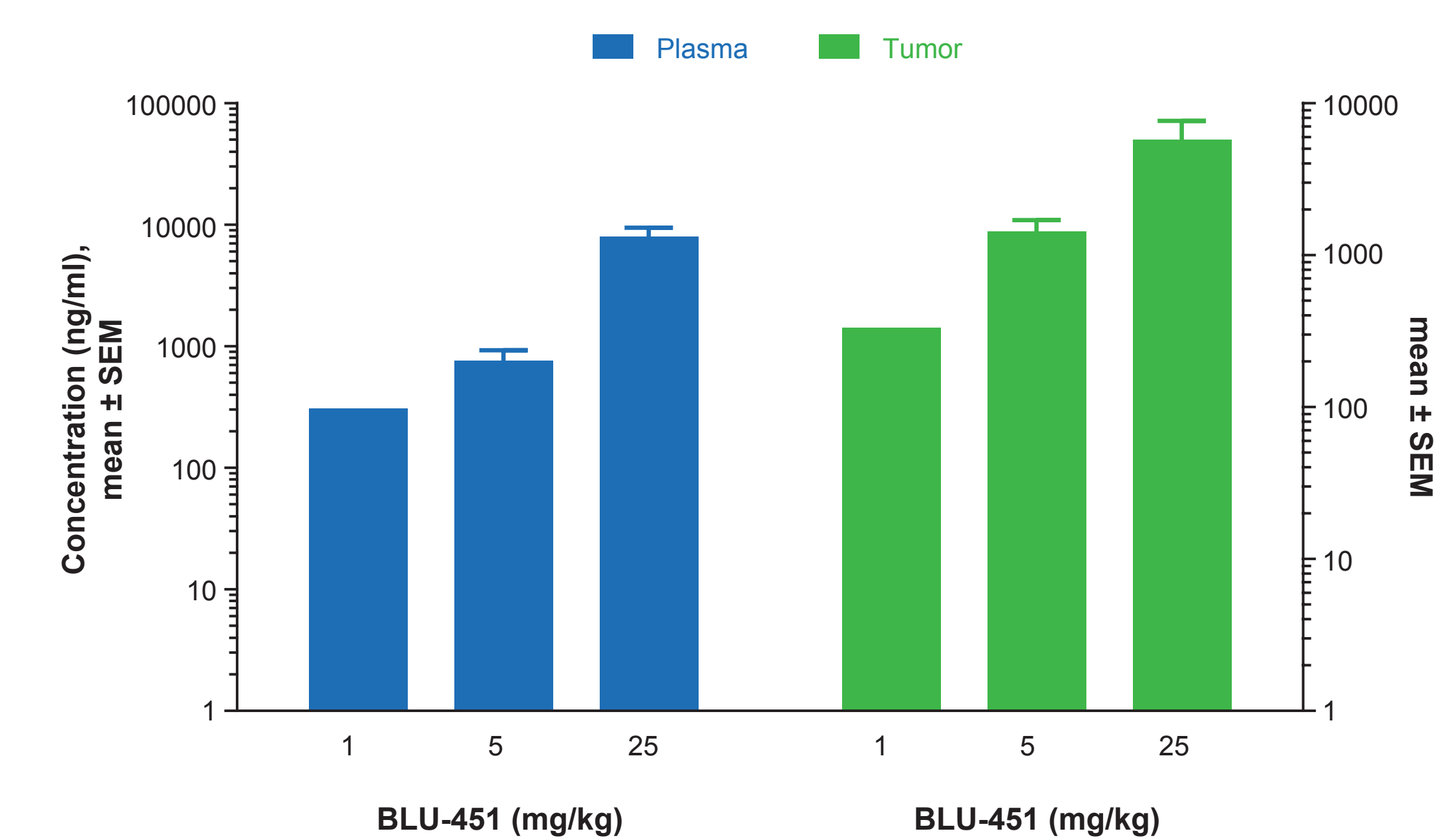
Figure 2: (continued)



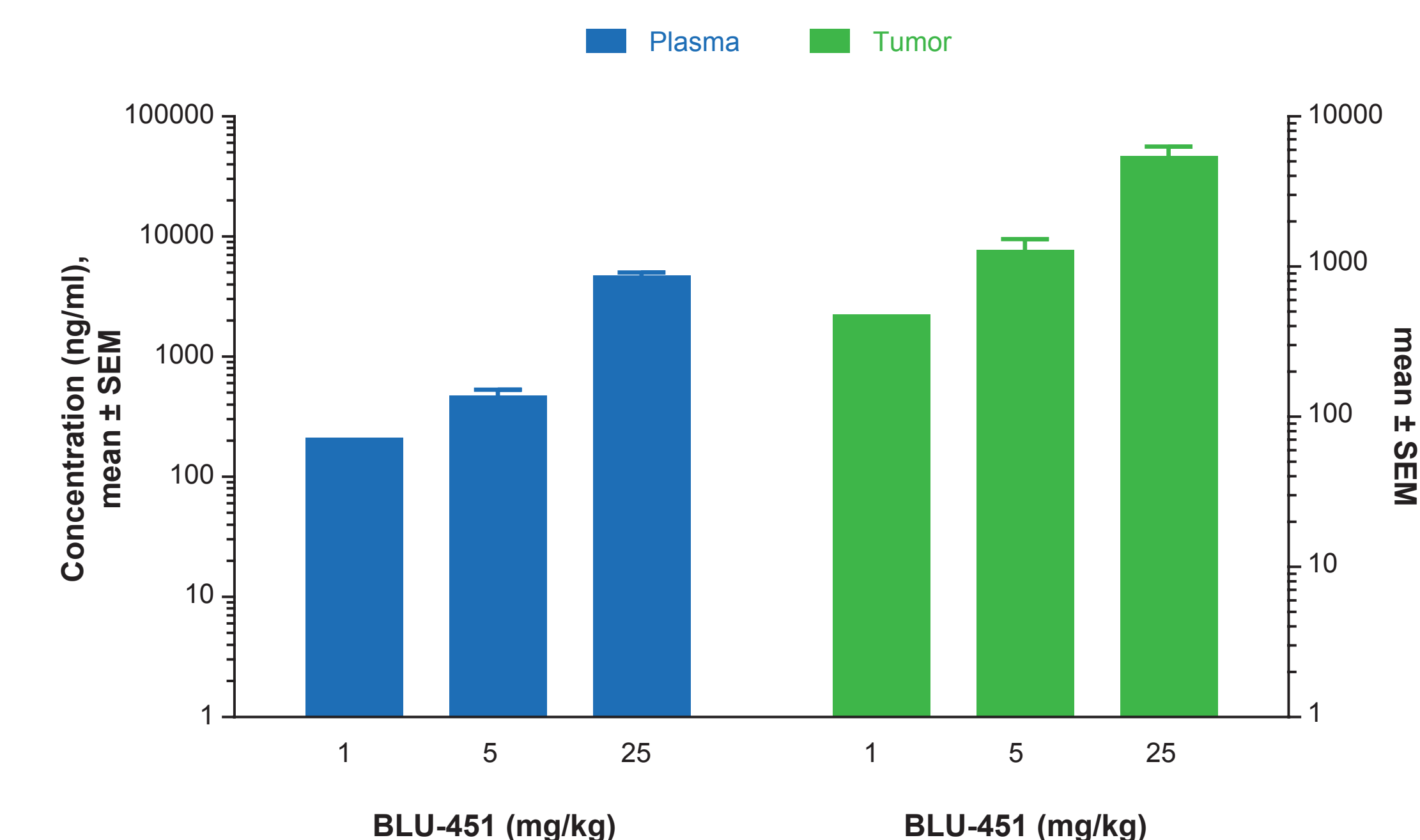
- Concentration of BLU-451 in plasma and tumor tissue on Day 18, 1 hour (h) (Figure 3A) and 3 h (Figure 3B) post administration, in the Ba/F3 cell-derived subcutaneous xenograft tumor model harboring the *EGFR* V769_D770insASV mutation
- BLU-451 exposure in plasma and tumor exceeded the corresponding cellular potency (IC₅₀=38.4 ng/mL) consistent with the observed activity

Figure 3: BLU-451 achieved high concentrations in both plasma and tumor tissues

A. BLU-451 concentration in plasma and tumor tissue on Day 18 at 1 hour post administration



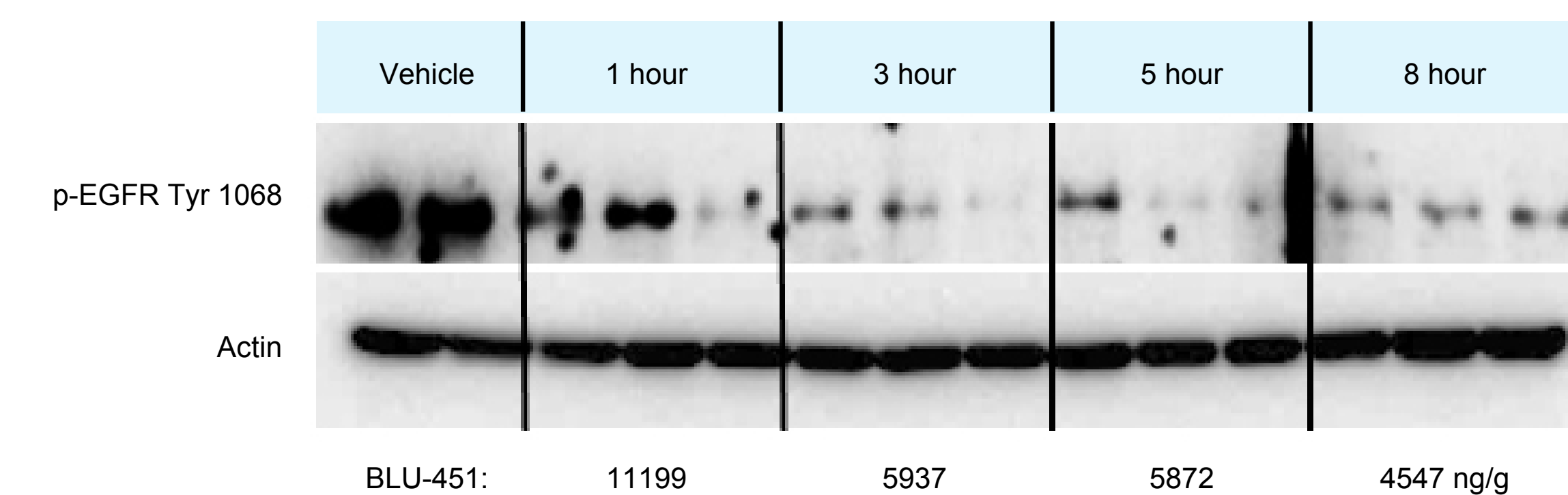
B. BLU-451 concentration in plasma and tumor tissue on Day 18 at 3 hours post administration



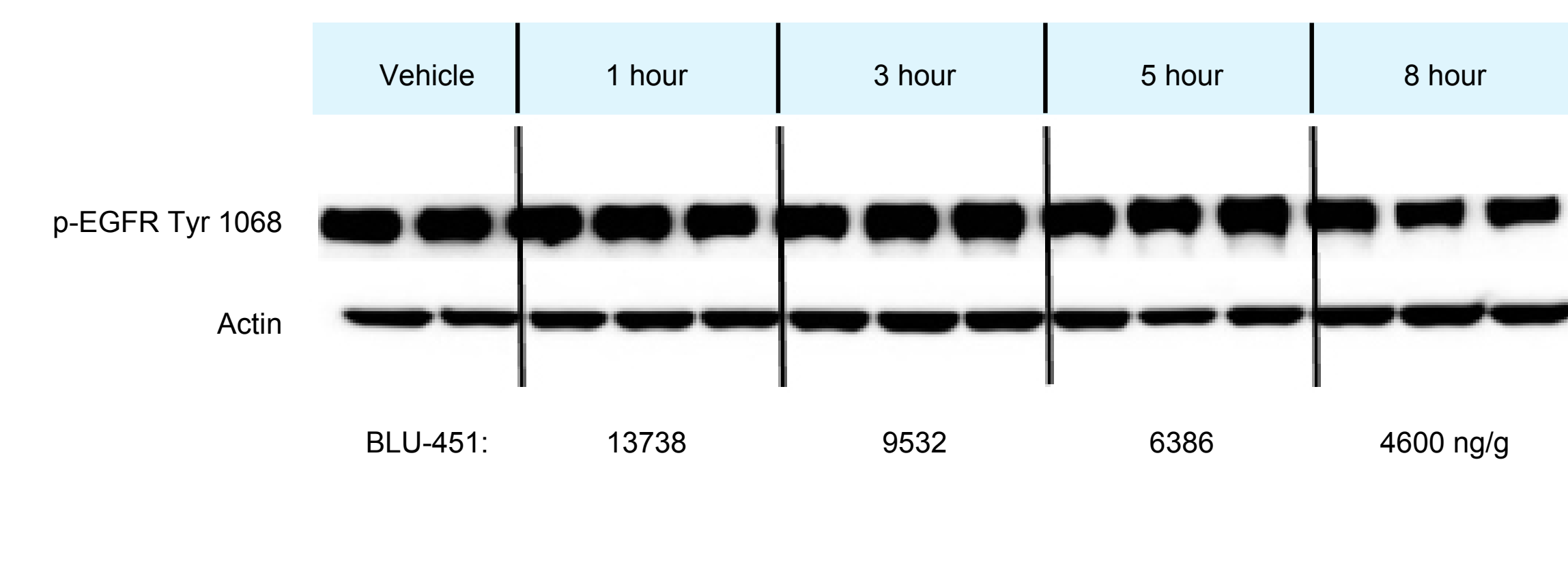
- Single-dose PK/PD time course analysis of BLU-451 (50 mg/kg) was performed in a Ba/F3 *EGFR* ex20ins V769_D770insASV xenograft tumor model using phosphorylation of *EGFR* on tyrosine residue 1068 as a surrogate marker for *EGFR* activation (vehicle tissue taken 3 h post dose) (Figure 4)
- Similar exposures to BLU-451 were observed in tumor, large intestine, and skin tissues
- BLU-451 potentially inhibited *EGFR* ex20ins in tumor tissue (Figure 4A) but had weak inhibition of WT *EGFR* in both large intestine and skin tissue samples (Figure 4B-C)

Figure 4: BLU-451 potentially suppressed *EGFR* phosphorylation in *EGFR* ex20ins-dependent tumor tissue, but not in skin and large intestine tissue despite high exposures

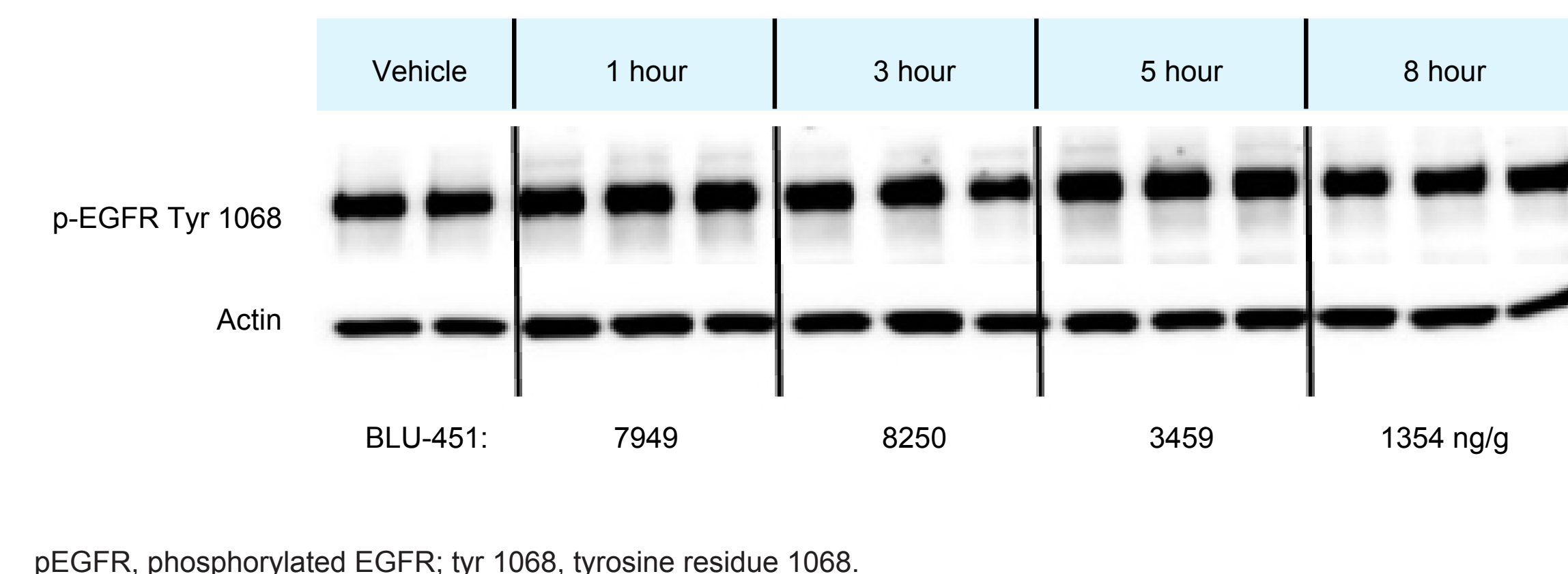
A. Tumor tissue (50 mg/kg BLU-451)



B. Large intestine tissue (50 mg/kg BLU-451)

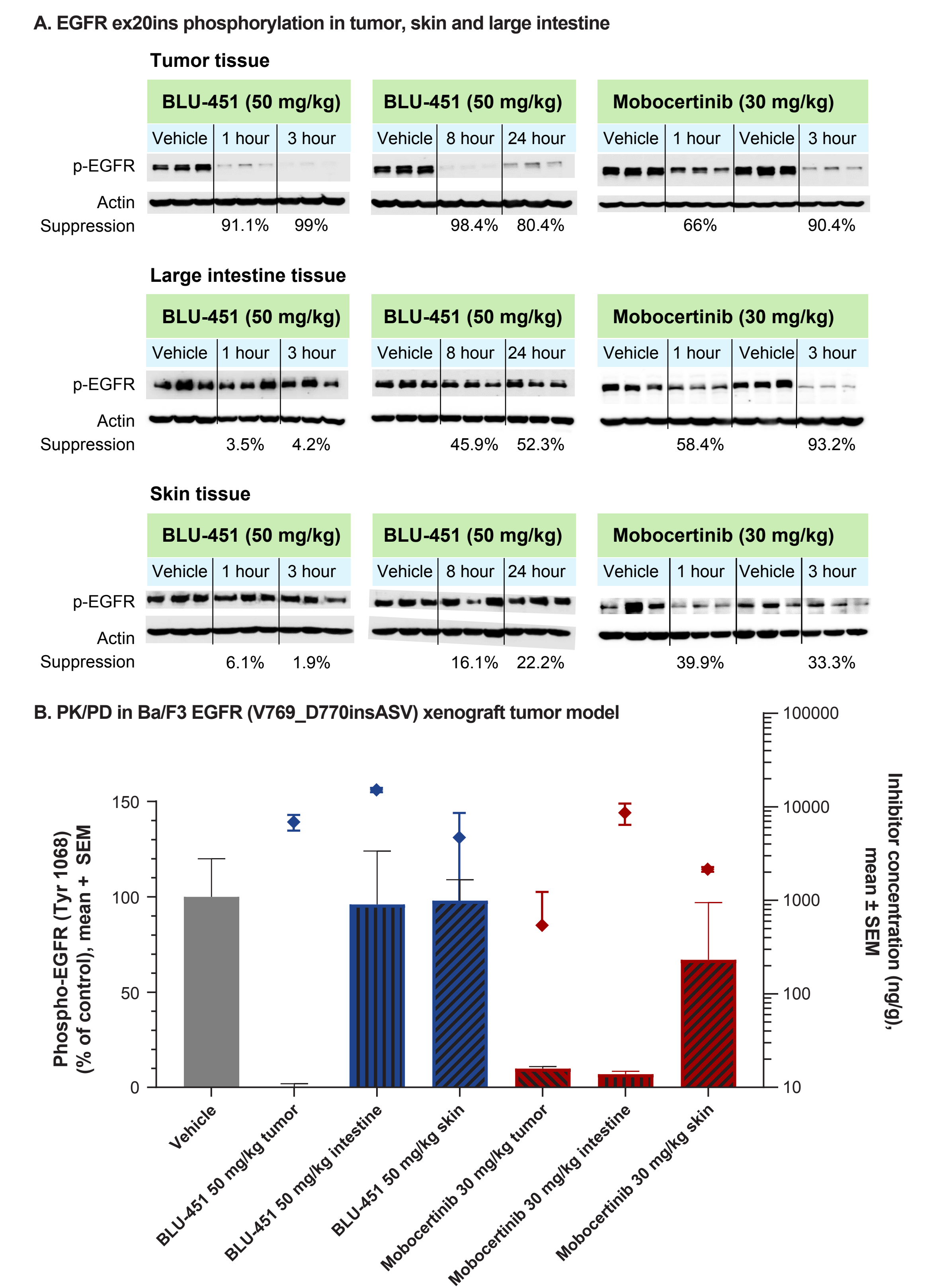


C. Skin tissue (50 mg/kg BLU-451)



- A single-dose PK/PD study of BLU-451 and mobocertinib was performed in a Ba/F3 *EGFR* (V769_D770insASV) xenograft tumor model using phosphorylation of *EGFR* on tyrosine residue 1068 as a surrogate marker for *EGFR* activation. Vehicle tissue for BLU-451 treatment comparisons was taken at either 3 h or 24 h post dose (Figure 5)
- BLU-451 potentially inhibited *EGFR* ex20ins in the tumor tissue but poorly inhibited WT *EGFR* in the skin and large intestine tissue samples. Mobocertinib potentially inhibited *EGFR* ex20ins in tumor tissue but also suppressed WT *EGFR* in skin and large intestine tissues (Figure 5A)
- PK/PD analysis showed comparable exposures for BLU-451 and mobocertinib in tumor, large intestine, and skin tissues 3 h post dosing. Both inhibitors suppressed *EGFR* phosphorylation in tumors, but only BLU-451 did not potentially suppress *EGFR* phosphorylation in the large intestine and skin tissue samples (Figure 5B)

Figure 5: BLU-451 and mobocertinib potentially inhibited *EGFR* ex20ins phosphorylation in tumor tissue, but only BLU-451 did not suppress WT *EGFR* phosphorylation in large intestine or skin tissue



Conclusions

- BLU-451 is a WT *EGFR* sparing, CNS-penetrant investigational *EGFR* ex20ins inhibitor
- BLU-451 is a potent inhibitor of *EGFR* ex20ins as well as other uncommon *EGFR* point mutations
- BLU-451 is selective for *EGFR* ex20ins relative to the human kinome and WT *EGFR* sparing in both cellular proliferation and *in vivo* preclinical tumor models
- BLU-451 treatment resulted in marked tumor regression in both CDX and PDX *EGFR* ex20ins tumor models
- Treatment with BLU-451, at doses which led to marked antitumor activity, had minimal impact on body weight in CDX and PDX *EGFR* ex20ins models
- In *EGFR* ex20ins tumor models, BLU-451 had high plasma and tumor exposures that exceeded cell-based potency of BLU-451
- PK/PD studies showed that BLU-451 potentially suppressed *EGFR* ex20ins in tumors but spared WT *EGFR* in large intestine and skin tissue samples
- These *in vitro* and *in vivo* results strongly support a first-in-human phase 1/2 clinical trial of BLU-451 in patients with advanced or metastatic solid tumors harboring *EGFR* ex20ins mutations (NCT05241873)⁶

References

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Disclosures

BWM, AP, BR, TS, DJE, HL and PGP were employees of Lengo Therapeutics when this study was conducted. HA, SV, GH, JA and RT are employees of Jubilant Biosys Limited, Bengaluru, India. Data in this poster were generated by Lengo Therapeutics and its collaborators.

