



HIGHLY SELECTIVE IRREVERSIBLE ITK INHIBITOR CPI-818 REDUCES ACUTE GRAFT-VERSUS HOST DISEASE

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INTRODUCTION

- Acute graft-versus-host disease (aGVHD) remains a major limitation of allogeneic hematopoietic cell transplantation (allo-HCT) despite prophylactic immunosuppression; not all patients who develop aGVHD respond to currently available treatment¹.
- Interleukin-2-Inducible T-Cell Kinase (ITK) is a non-receptor tyrosine kinase with an important role in T cell activation (**Fig. 1a**) and targeting ITK has been shown to be associated with less GVHD^{2,3}.
- CPI-818 is a highly selective ITK inhibitor (**Fig. 1b and c**) and is currently being evaluated in patients with relapsed/refractory T-cell Lymphoma (NCT03952078)

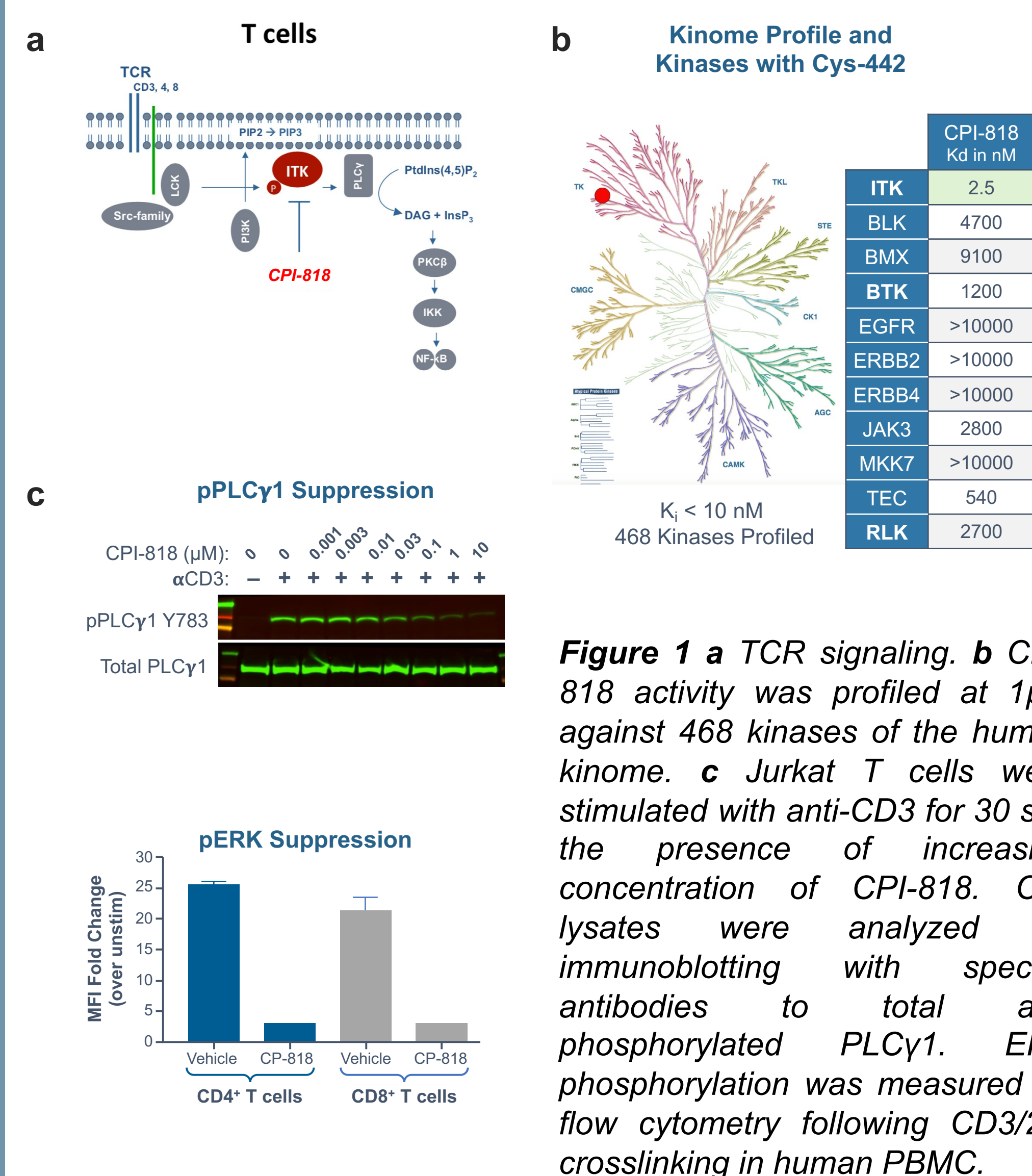


Figure 1 **a** TCR signaling. **b** CPI-818 activity was profiled at 1μM against 468 kinases of the human kinome. **c** Jurkat T cells were stimulated with anti-CD3 for 30 s in the presence of increasing concentration of CPI-818. Cell lysates were analyzed by immunoblotting with specific antibodies to total and phosphorylated PLCγ1. ERK phosphorylation was measured by flow cytometry following CD3/28-crosslinking in human PBMC.

AIM

To study the effect of ITK inhibition by CPI-818 in preclinical mouse models of GVHD.

RESULTS

CPI-818 treatment reduces GVHD and improves survival

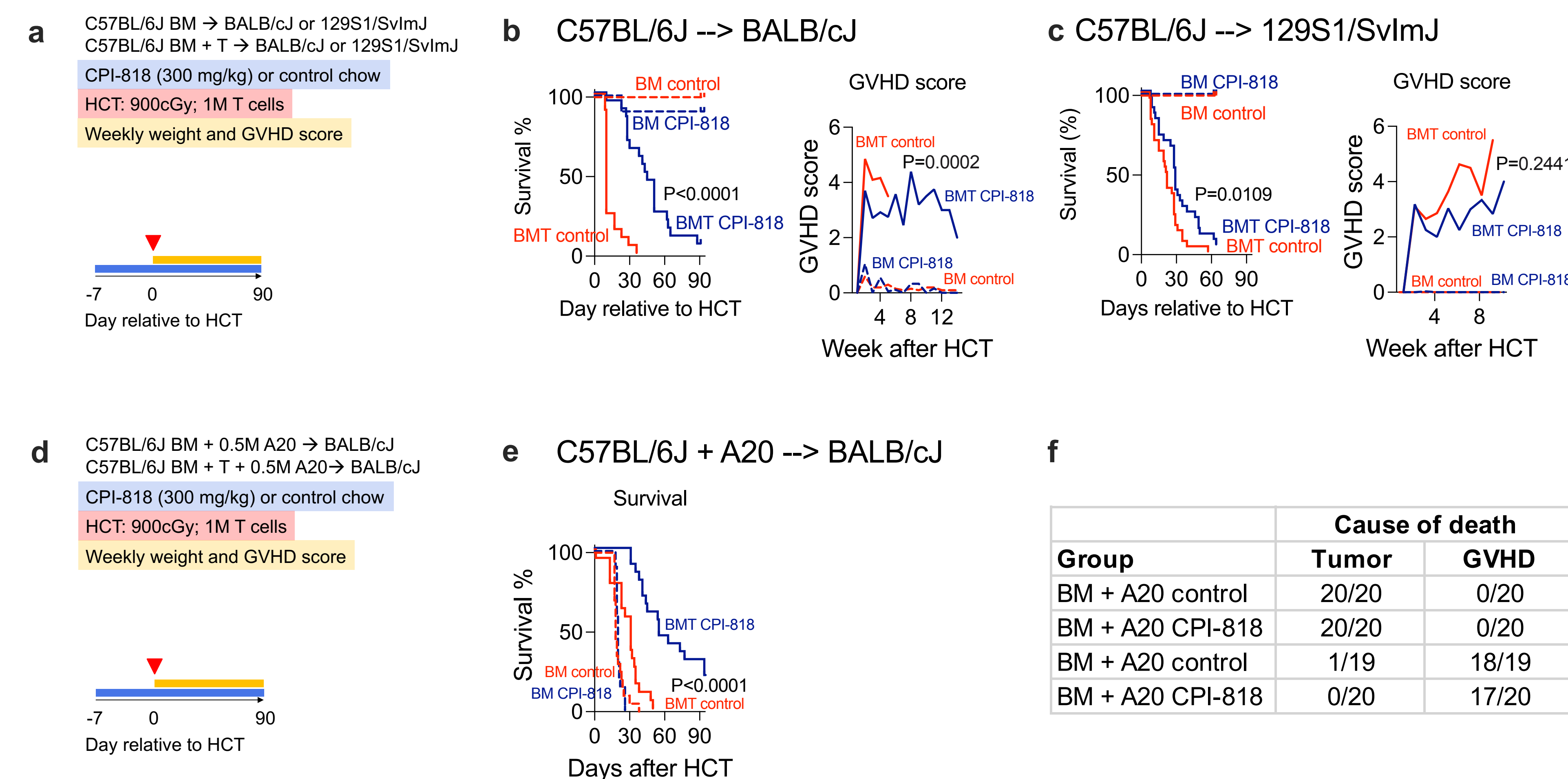


Figure 2 HCT recipient were treated with CPI-818 formulated (300mg/kg) or control diet starting D-7 until D90 relative to HCT **a** Schematic GVHD model **b** Survival and clinical GVHD score of BALB/cJ recipients after lethal irradiation and C57BL/6N HCT (MHC-disparate) **c** Survival and clinical GVHD score of 129S1/SvImJ recipients after lethal irradiation and C57BL/6N HCT (minor MHC-mismatched) and **d** Schematic GVT model **e** Survival and cause of death of BALB/cJ recipients after lethal irradiation and C57BL/6N HCT + lymphoma cell line A20. Survival data were statistically analyzed using Mantel-Cox log-rank test. GVHD score data were statistically analyzed using the Velardi test, n = 10-30 mice per group. All results are from two or three independent experiments.

CPI-818 treatment suppresses T cell proliferation and activation and increases regulatory T cells in GVHD

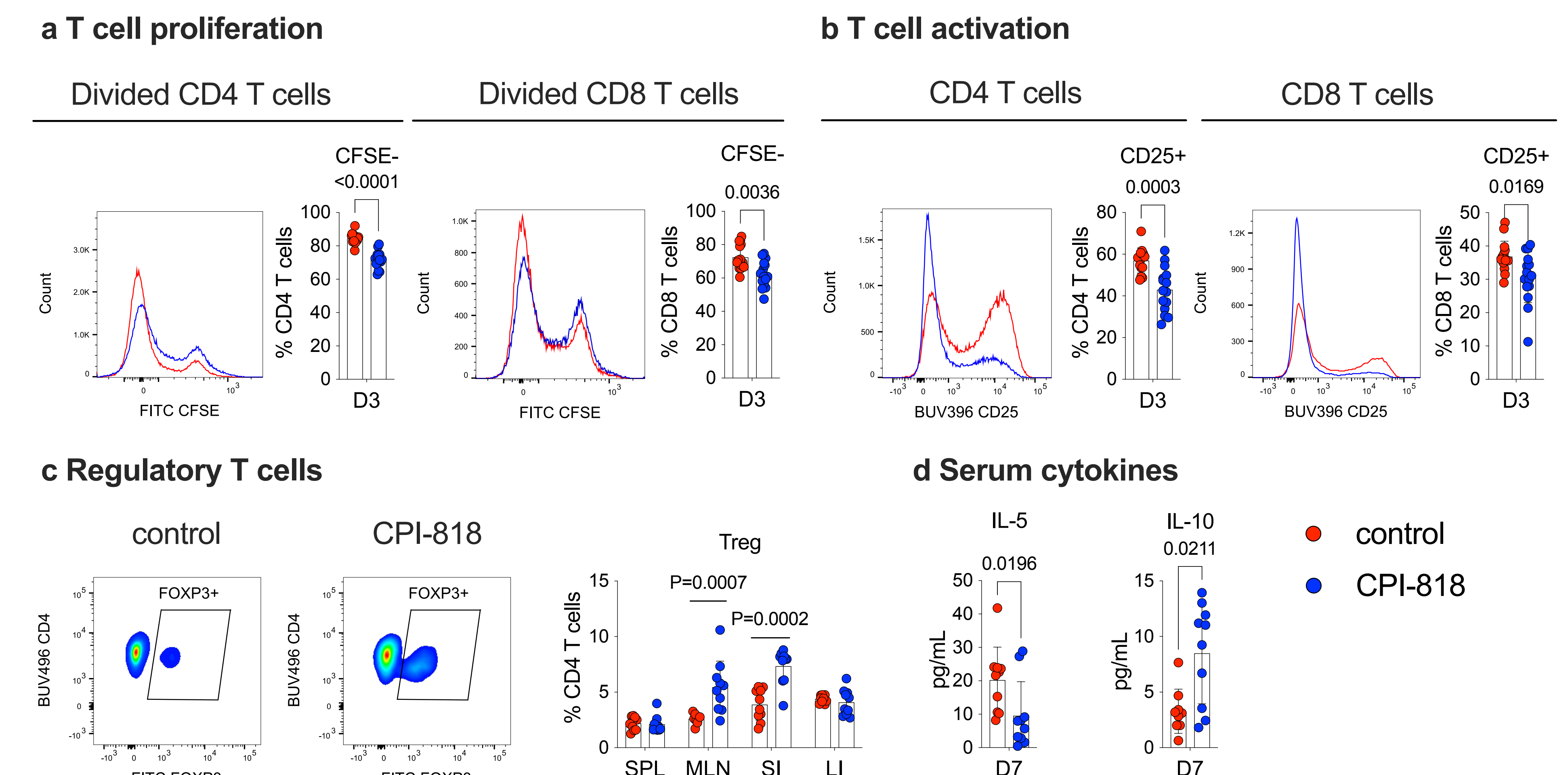


Figure 3 BALB/cJ recipients after lethal irradiation and C57BL/6N HCT with either 5x10⁶ CFSE labeled T cells (harvest D3) or 1x10⁶ T cells (harvest D7) and were treated with CPI-818-formulated (300 mg/kg) or control diet from D-7 relative to allo-HCT to harvest day. **a** Representative histogram of CFSE (red: control and blue: CPI-818) and CFSE- percentages **b** Representative histogram of CD25 (red: control and blue: CPI-818) and percentages of CD25+ are shown from spleen on D3 post allo-HCT. **c** Representative flow dot plot from MLN and FOXP3+ percentages are shown from SPL, MLN, SI and LI on D7 **d** Serum cytokines were measured at D7 post allo-HCT. All comparisons were performed by two-tailed unpaired Mann-Whitney Test. Values are means ± standard deviation, n = 10-20 mice per group. All results are from two independent experiments.

CONCLUSIONS

- ITK inhibition has potential as a novel targeted approach to prevent aGVHD through
 - a) the suppression of early T cell activation and proliferation
 - b) decreased concentrations of pro-inflammatory cytokines, increased concentration of anti-inflammatory cytokines and increased regulatory T cells
- CPI-818 is the most potent and selective ITK inhibitor reported to date and these data highlight its promise as a novel agent for the prevention of aGVHD.

REFERENCES

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ACKNOWLEDGEMENTS

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