Adenosine signature genes associate with tumor regression in renal cell carcinoma (RCC) patients treated with the adenosine A2A receptor (A2AR) antagonist, CPI-444.

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Background

- Adenosine blocks T-cell activation and promotes myeloid suppression
- CPI-444 is an oral small molecule antagonist of the adenosine 2A receptor (A2AR) that has shown efficacy in animal models and is associated with T cell activation. ^{a,b}
- Ongoing clinical trial of CPI-444 +/- anti-PD-L1 atezolizumab demonstrates tumor responses to monotherapy and combination in multiple indications including renal cell carcinoma (RCC). ^{c,d}
- Future trials in RCC would benefit from a biomarker that predicts patient response.



Phase 1/1b Clinical Study with CPI-444





Adenosine Signature and Co-expressed Genes Identified in Patient Subset by Unsupervised Clustering A separate patient subset is low for adenosine signature and expresses alternate biological pathways

- Gene expression was collected from pre-treatment biopsies
- Expression was correlated across patients and clustered





CD26

Adenosine pathway

independent tumor

Model of distinct RCC subclasses



Responsive to

A2AR inhibition



Summary

 Adenosine-response genes define an Adenosine Signature biomarker that enriches for patients with tumors that respond to A2AR antagonism by CPI-444

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- Gene clustering analysis identified two distinct populations of RCC

 Adenosine Signature high / growth factor low
 Adenosine Signature low and high for growth factor
- response genes & CD26 Enables future studies to employ Adenosine Signature for
- identification of sub-groups that associate with tumor response