

### Lead Inventor:

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Developed in collaboration with the University of Michigan and Astellas Pharma, Inc.



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#### Background & Unmet Need

- Pancreatic ductal adenocarcinoma (PDAC) is an extremely aggressive cancer with a 5-year survival rate of only 10% and no effective therapies
- PDAC, among other cancer types, frequently exhibits loss of tumor suppressor SMAD4, which is often associated with co-deletion of the nearby housekeeping enzyme, malic enzyme 2 (ME2)
- This SMAD4/ME2 co-deletion is observed in ~20% of PDAC and >6% of gastrointestinal cancers
- Malic Enzyme 1 (ME1) and ME2 belong to the same family of enzymes, which are involved in several essential metabolic processes and are likely to be functionally redundant
- Deletion of ME1 in ME2-mull tumors may confer synthetic lethality, making it a good target for selective killing of ME2-null pancreatic cancers
- Unmet Need: Inhibitors of ME1 for treatment of PDAC and other ME2-null cancers

#### **Technology Overview**

- **The Technology:** A small-molecule inhibitor of ME1, AS1134900, for treatment of PDAC and gastrointestinal cancers
- AS1134900 was identified from a proprietary chemical library (Astellas Pharma) through a diaphorase/resazurin-coupled assay for measuring ME1 enzymatic activity
- AS1134900 inhibits ME1 activity by allosteric binding and doesn't have cross reactivity for ME2
- **PoC Data:** Validated inhibition of ME1 activity (IC50 = 0.73μM)
- ME1 inhibition in ME2-null pancreatic cancer cells and xenograft tumors leads to profound growth inhibition
- ME1 knockout in adult mice leads to enhanced CD8+ T cells and their infiltrations to tumors, suggesting potential synergy with immunotherapy

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Patents: PCT Application Filed

Publications: Yoshida et al. *Biochemistry*. 2022.

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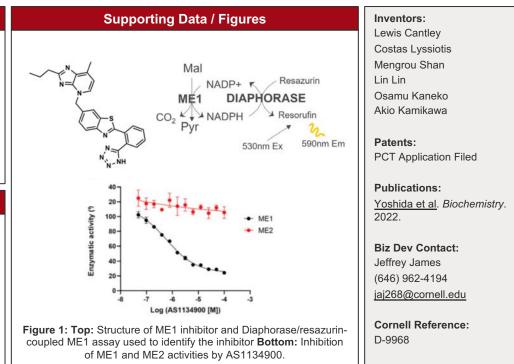
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#### **Technology Applications**

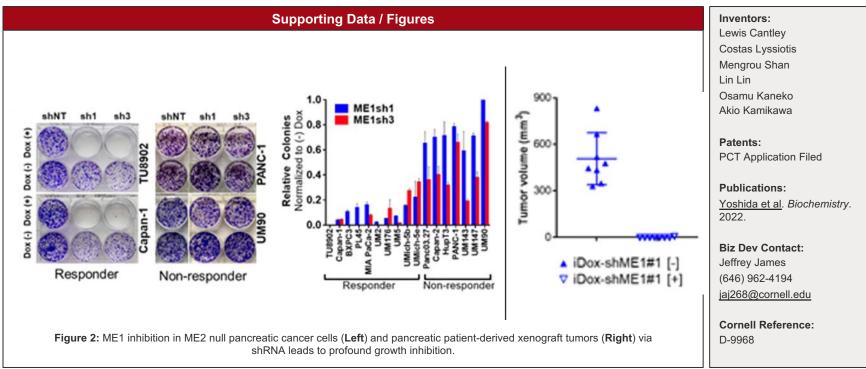
- Treatment of patients with ME2-null PDAC
- Treatment of patients with other ME2-null gastrointestinal cancers, such as colon, esophagus, biliary, and stomach cancer

### **Technology Advantages**

- Inhibitor is specific for ME1 and does not have cross reactivity for ME2
- Potential synergy for ME1 inhibitors in combination of with checkpoint blockade therapy
- ME2 expression may be a biomarker for patient selection in ME1 inhibitor therapy
- Off-target toxicity of ME1 deletion was not observed in genetic models



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