



CD3

CENTRE FOR  
DRUG DESIGN  
AND DISCOVERY

Potent, novel, lead-stage  
**MALT1 Small Molecule Inhibitors**

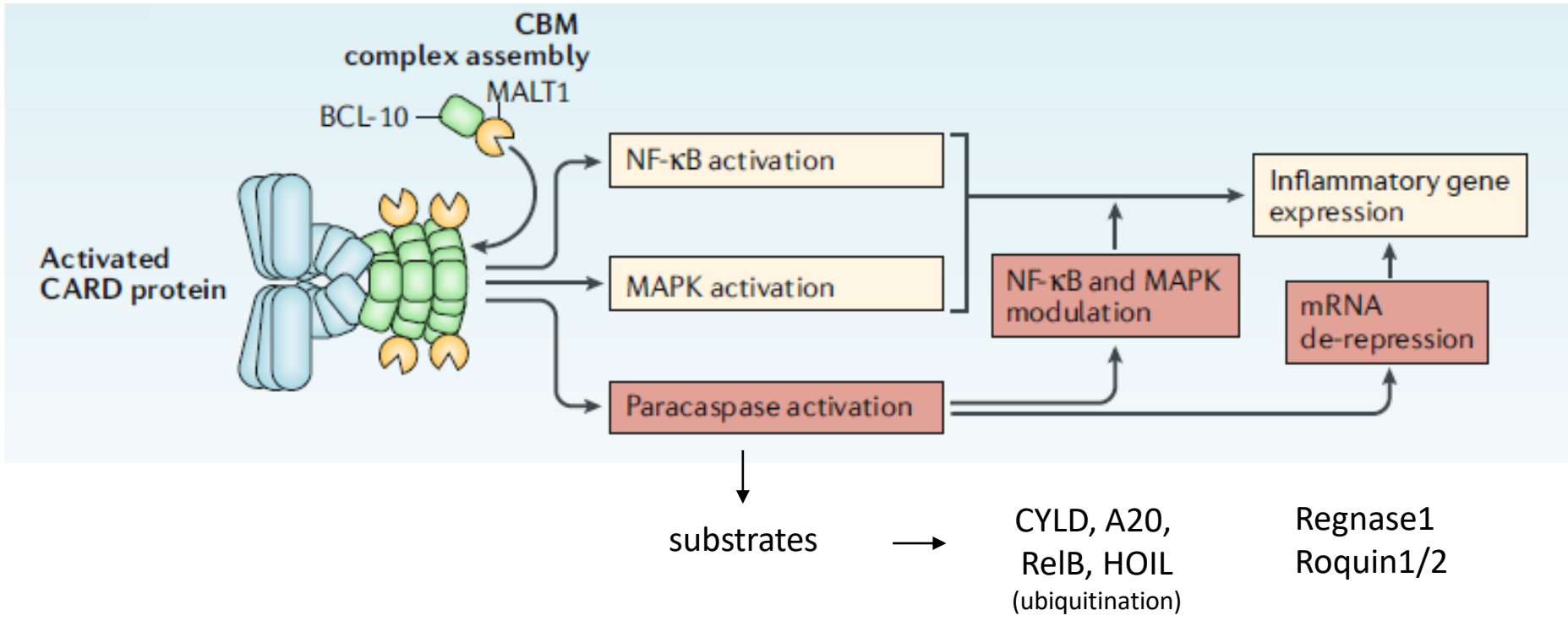
July 2019

# MALT1 inhibitors – Project overview

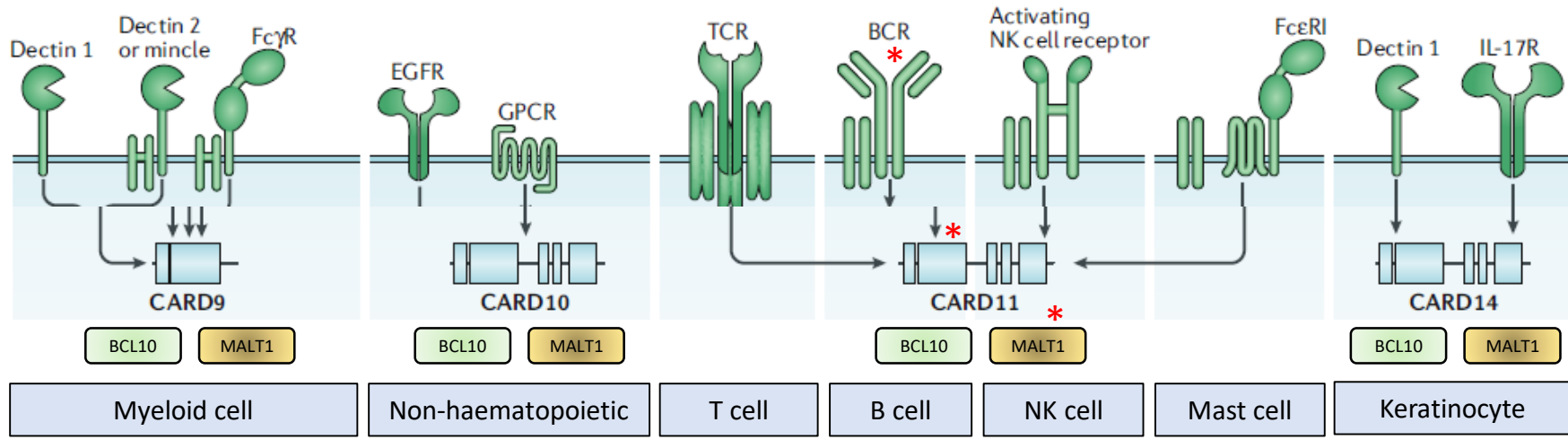
- **Allosteric MALT1 protease inhibitors at lead optimization stage**
- **Therapeutic applications:**
  1. **Oncology:**
    - I. MALT1-addicted B-cell malignancies (DLCL, MCL, CLL, others)
    - II.  $T_{reg}$  modulation in the tumor micro-environment to augment antitumor immunity (broadly applicable immune-oncology strategy across various tumor types)
  2. Several inflammatory disorders (e.g. psoriasis)

# MALT1-mediated signaling pathways

- Point of convergence: CARD-BCL10-MALT1 complex
  - **MALT1 as scaffold:** Initiation of T-cell (B-cell) receptor signalling to NFκB effect
  - **MALT1 as protease:** Enhancement & finetuning of the NFKB and MAPK signaling + termination of the signal



# MALT1-mediated proliferative disorders



**Hyper-activated MALT1**

**Non-lymphoid cancers:**  
 Breast (AGTR1 – HER2)  
 Lung (EGFR)  
 Melanoma  
 Glioblastoma

**B-cell malignancies:**  
 MALT lymphoma\*,  
 ABC-DLBCL\*,  
 MCL, CLL, PEL\*,  
 BENTA\*

**T cell malignancies:**  
 Cézary syndrome\*,  
 CTCL, ATLL\*, PTCL

\* genetically driven

# MALT1-mediated anti-tumor immunity

- Tumors with - high ratio  $\frac{T_{\text{eff}} \text{ CD8}^+}{T_{\text{reg}} \text{ FOXP3}^+}$ 
  - better prognosis / increased overall survival
- high  $T_{\text{reg}}$  infiltration
  - poor prognosis / shorter overall survival
  - limits efficacy of PD1 checkpoint blockade
- MALT1 as an **immunomodulator**:
  - ⇒ modulate  $T_{\text{reg}}$  phenotype
  - ⇒ reduce IL-2 production
  - ⇒ reduce  $T_{\text{reg}}$  numbers
- **In vivo ‘proof of principle’**: pharmacologic and/or genetic models

# MALT1 is critical to suppress anti-tumor immunity

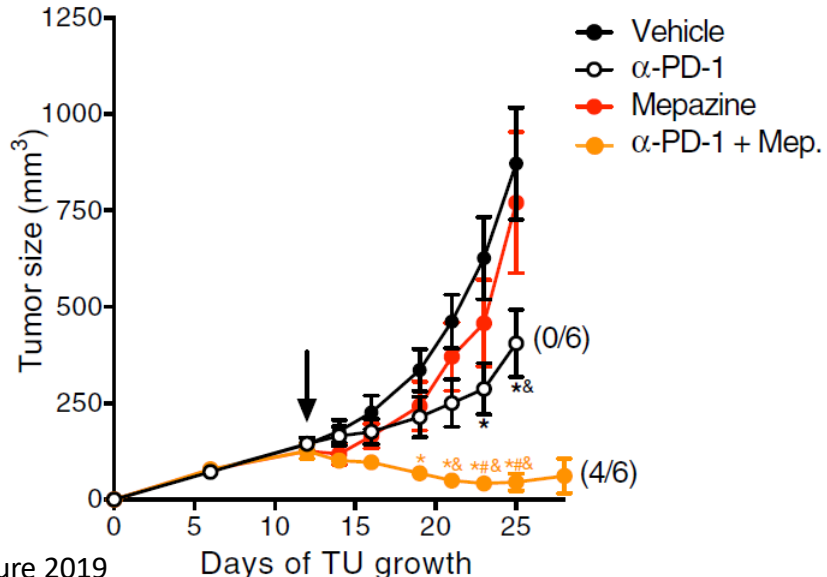
- MALT1 protease inhibition reverses the immune-suppressive Treg phenotype:
  - **Pharmacologic inhibition of MALT1 causes Treg cells to prime tumors for immune checkpoint therapy**, yet does not cause systemic autoimmunity (Di Pilato et al., Nature 2019)



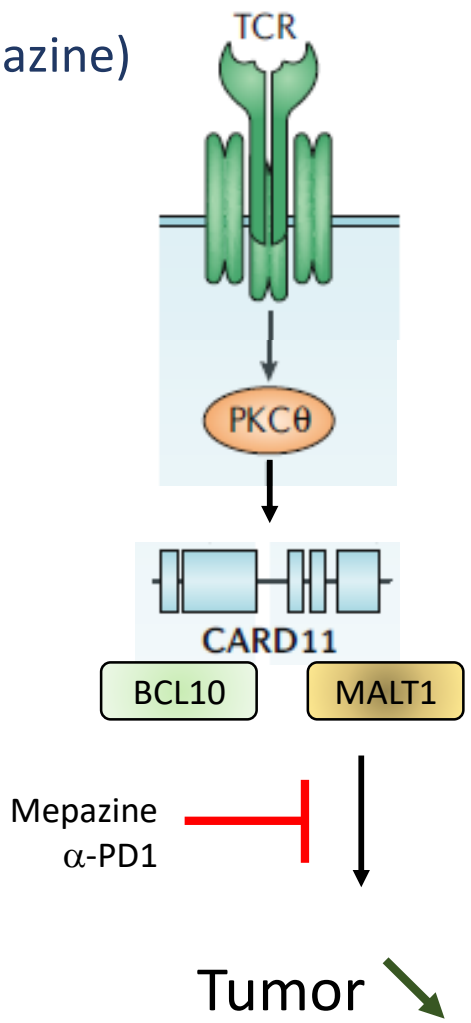


# MALT1i increases anti-tumor immunity

- *In vivo* “proof of concept” : pharmacologic (Mepazine)
  - **MC38 colon carcinoma** model (low immunogenic)
  - synergistic control through anti-PD-1 and mepazine combination treatment



Di Pilato *et al.*, Nature 2019





# MALT1 is critical to suppress anti-tumor immunity

- MALT1 protease inhibition reverses the immune-suppressive Treg phenotype:
  - Pharmacologic inhibition of MALT1 causes Treg cells to prime tumors for immune checkpoint therapy, yet does not cause systemic autoimmunity (Di Pilato et al., Nature 2019)
  - **MALT1 protease is essential to mediate the immune-suppressive function of Tregs** in the tumor microenvironment and acute genetic blockade or pharmacologic inhibition enhances anti-tumor immunity (Rosenbaum et al., Nature Comm. 2019; Cheng et al., J. Immunol. 2019; Baens et al., Eur. J. Immunol. 2018)



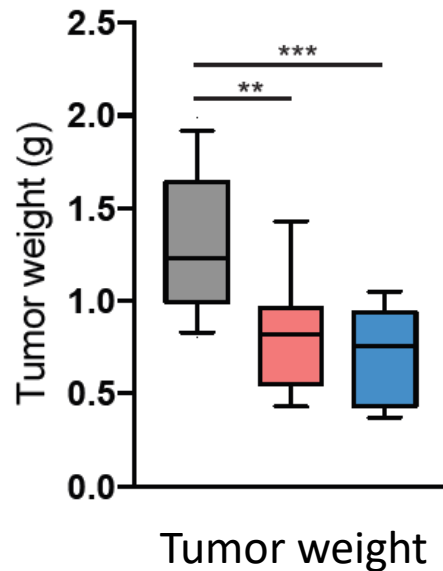
# MALT1 protease is required to maintain $T_{reg}$ levels

- *In vivo* “proof of concept” : genetic mouse models

## MALT1-SR and MALT1-PD

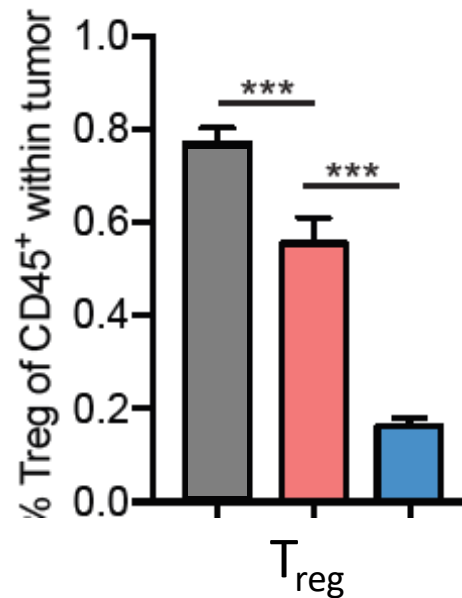
reduce

MC38 tumor growth



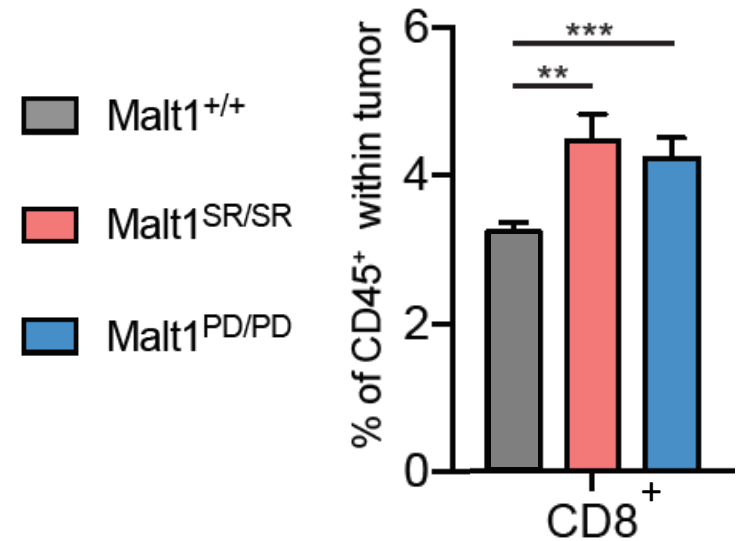
reduce

$T_{reg}$  tumor infiltration



increase

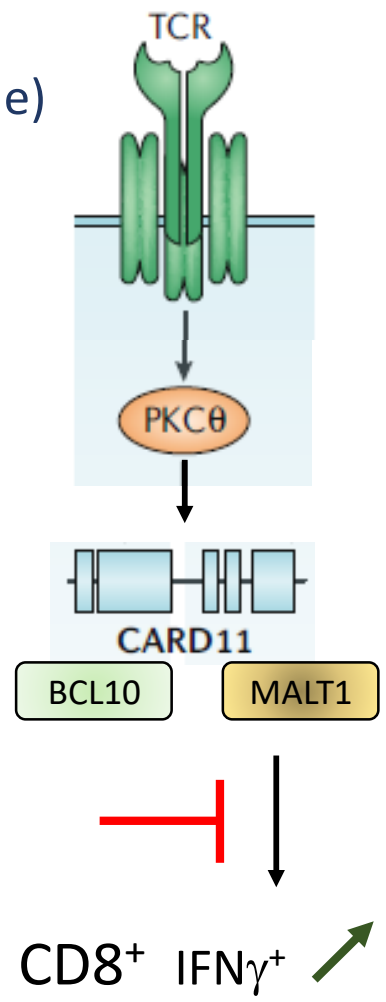
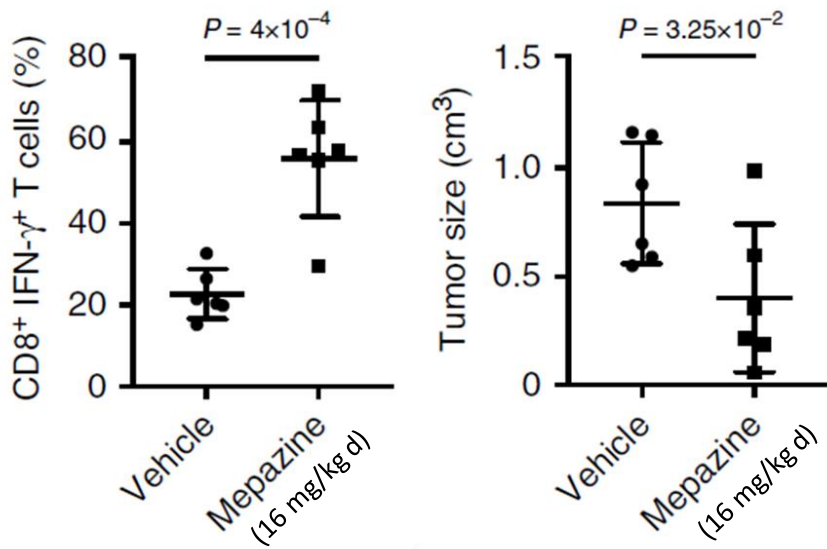
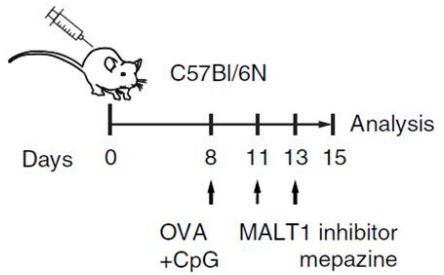
CD8<sup>+</sup> T cell tumor infiltration



Baens et al., Eur J. Immunol. 2018

# MALT1i increases anti-tumor immunity

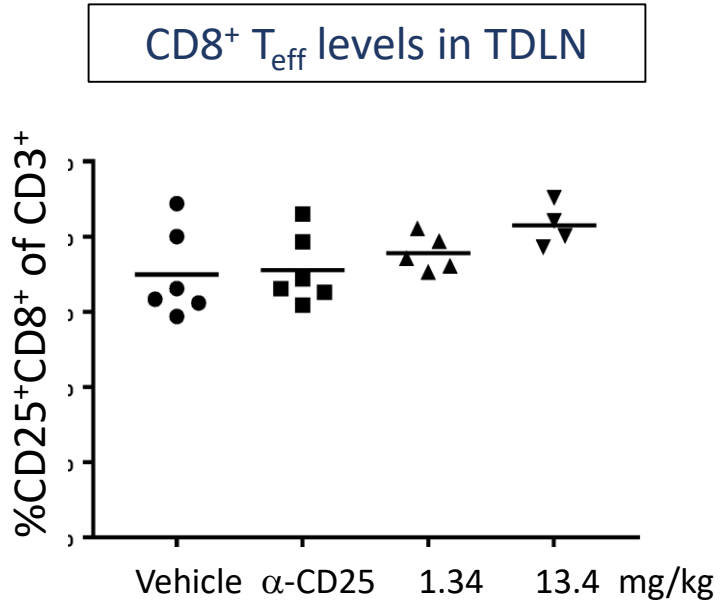
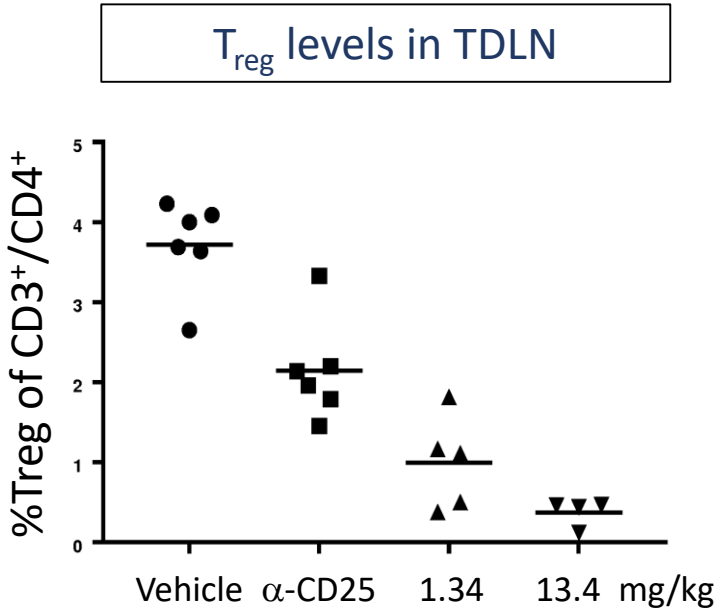
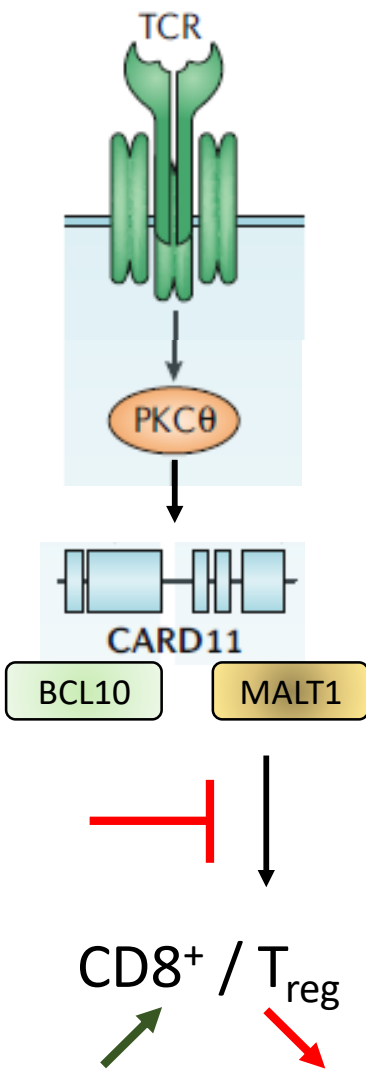
- *In vivo* “proof of concept” : pharmacologic (Mepazine)
  - Melanoma mouse model
  - Mepazine:
    - increases CD8+ T cells (IFN $\gamma$ +) in TME
    - reduces tumor size



Rosenbaum *et al.*, Nat. Comm. 2019

# MALT1i depletes tumor T<sub>reg</sub> levels

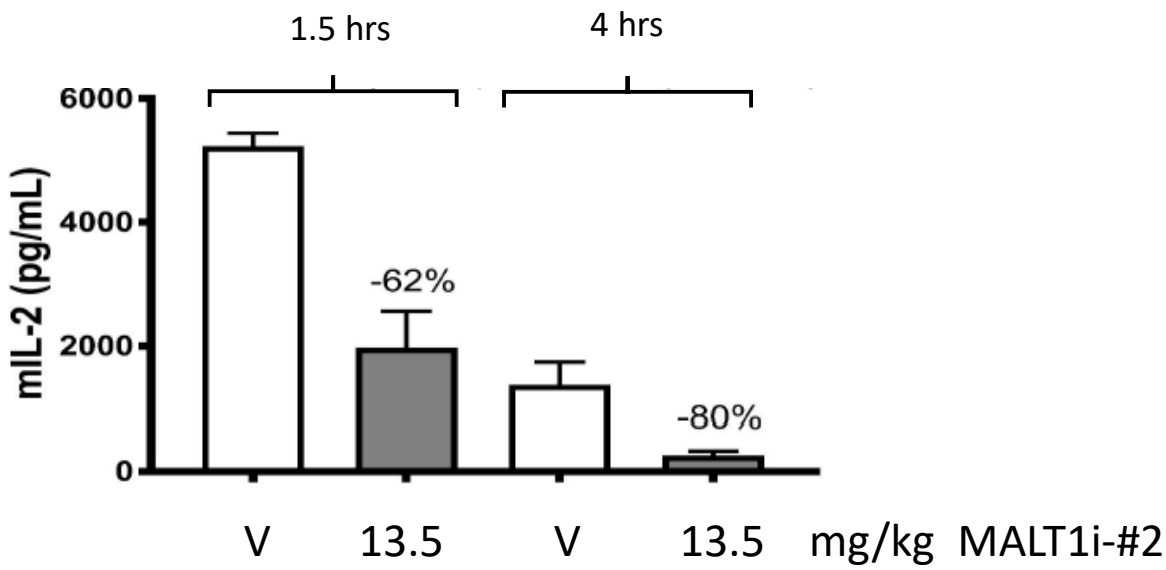
- *In vivo* “proof of concept” : pharmacologic (Medivir)
  - MB49 mouse bladder cancer model
  - MALT1i-#2 p.o. treatment (1.35 or 13,5 mg/kg day 8-9-10-11)



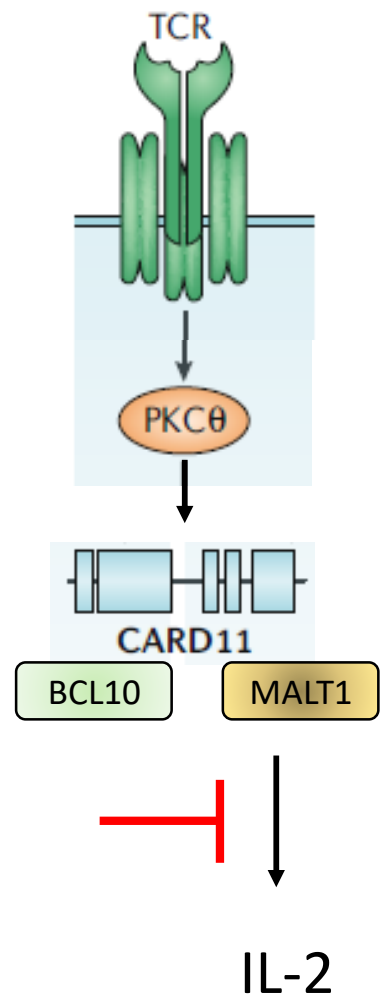
WO2018141749

# MALT1i reduces IL-2 levels

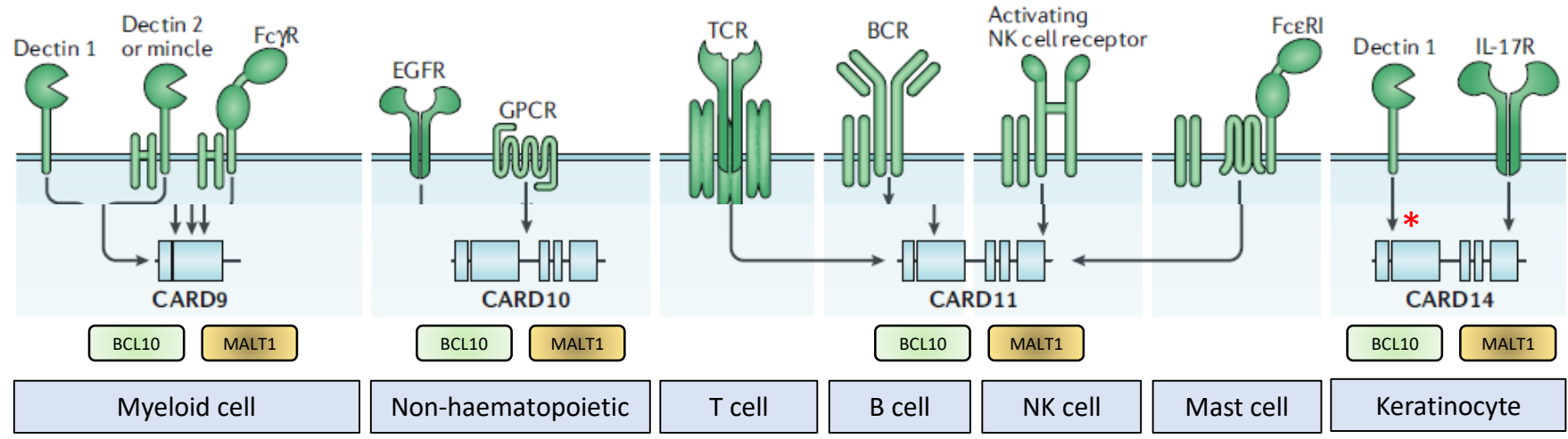
- *In vivo* “proof of concept” : pharmacologic (Medivir) MALT1 inhibition reduces: - IL-2 serum levels (α-CD3 stimulation)



Finnberg et al., IO summit, Boston, 2018



# MALT1-mediated inflammatory disorders



Hyper-activated MALT1

↓ ↓

Rheumatoid Arthritis  
Sjogren's Syndrome  
Multiple Sclerosis  
IBD, colitis  
Lupus

↓

**Psoriasis**

\* genetically driven

# Drug discovery tools and capabilities

**Assay cascade:** fully established/validated & up and running

- MALT1 enzyme assay
- Cell-based MALT1 substrate-cleavage assay (HEK293)
- IL2 reporter (Jurkat) & IL2 whole-blood assay (m/h)
- MALT1 dependent and independent lymphoma cell lines
- *In vivo* PD markers (MALT1 cleavage-specific Abs and downstream cytokines) validated (m/h)
- Short-term *in vivo* PD/efficacy mouse model (CARD14 mutant model, VIB) validated
- Whole-body and T-cell specific inducible protease-dead knock-in mice available, unpublished data up to 4 months PD
- VIB screening granted patent

**Deep MALT1 biology expertise** (from discoverers of MALT1 protease function)

- Mathijs Baens
- Rudy Beyaert Lab

**Ongoing drug discovery and development program**

- In depth MALT1 medchem know-how



# MALT1 program – Status summary

- Allosteric MALT1 protease inhibitors at lead stage
- 2 compound subseries
  - Potent inhibition of MALT1 protease activity in vitro ( $IC_{50}$ 's up to 30 nM)
  - Inhibition of MALT1 protease activity in cells ( $EC_{50}$ 's up to 250 nM)
  - Inhibition of IL2 in Jurkat T cells ( $EC_{50}$ 's up to 200 nM)
  - Drug-like (Mw, cLogP, PSA...) properties
  - clear SAR available
  - Promising in vitro ADMET
  - Good oral bioavailability in mice
  - Proprietary and publicly available co-crystals for related allosteric inhibitors
- Composition of matter IP available – patent applications in preparation

