# AACR-NCI-EORTC Virtual International Conference on **MOLECULAR TARGETS AND CANCER THERAPEUTICS** October 7-10, 2021



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# BBP-398, a potent, small molecule inhibitor of SHP2, enhances the response of established NSCLC xenografts to KRAS<sup>G12C</sup> and EGFR<sup>mut</sup> inhibitors

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#### **James Stice**

I have the following financial relationships to disclose:

Consultant for: none

Speaker's Bureau for: none

Grant/Research support from: none

Stockholder in: BridgeBio Pharma

Employee of: BridgeBio Pharma

I will not discuss off label use and/or investigational use in my presentation.

SHP2 inhibition has the potential to become a combination drug across a myriad of cancers





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# BBP-398 is a potent and selective SHP2 inhibitor with a favorable PK profile





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Phosphatase	IC <sub>50</sub> (nM)
Wild-type SHP2	13
SHP1	>10000
SHP2 E76K	>10000

SHP2 Selectivity			
Class	Results		
419 Kinase Ambit panel @ 1 $\mu$ M	4 Kinases: PRKCH, LATS1, GCN2, HPK1		
CEREP & PTPase panel @ 10 µM	No significant inhibition		

#### **BBP-398** Pharmacokinetics

Species	Dose IV/PO (mg/kg)	CL (ml/min/kg)	Vd <sub>ss</sub> (L/kg)	T <sub>1/2</sub> (hr) IV	C <sub>max</sub> (mM) PO	F%
Rat	0.3 / 10	10.2	6.0	9.2	0.67	51
Dog	1 / 10	8.5	5.5	8.2	6.5	115
Cyno	0.3 / 1	6.0	2.7	6.4	0.43	52

### BBP-398 is a selective SHP2i with no hERG inhibition at concentrations up to 30 µM\*

\*patchclamp

BBP-398 shows potent pathway and tumor growth inhibition across a panel of cell lines with active MAPK signaling





Cell Line	Mutation	(IC <sub>50</sub> ,nM)	(IC <sub>50</sub> ,nM)
KYSE-520	EGFR <sup>amp</sup>	80	210
NCI-H1975	EGFR <sup>L858R/T790M</sup>	400	180
HCC827	EGFR <sup>Ex19del</sup>	460	1200
NCI-H358	KRAS <sup>G12C</sup>	690	280
NCI-H1299	NRAS <sup>Q61K</sup>	>25,000	>25,000

BBP-398 Preclinical In Vivo Monotherapy Efficacy



BBP-398 and sotorasib (AMG510) synergize to inhibit MAPK signaling and cell viability in NCI-H358 KRAS<sup>G12C</sup> cells





Combination of BBP-398 and osimertinib induces robust regressions in the osimertinib-resistant HCC827-ER xenograft model



HCC827-ER (EGFR<sup>ex19del</sup>, EGFR<sup>amp</sup>, & MET<sup>amp</sup>) - NSCLC CDX



Vehicle

BBP-398 (100 mg/kg)

Osimertinib (5 mg/kg)

BBP-398 (100 mg/kg) + osimertinib (5 mg/kg)

		Day 15*		
Group (n=5)	TGI	Mean tumor regression	Number of regressions	Mean body weight change
- Vehicle		-	0/2	+5.2%
→ BBP-398 (100 mg/kg)	84%	-	0/4	+6.3%
<ul> <li>Osimertinib (5 mg/kg)</li> </ul>	64%	-	0/4	+1.0%
<ul> <li>BBP-398 (100 mg/kg) + osimertinib (5 mg/kg)</li> </ul>	-	47%	5/5	-6.3%

\*3/5 mice in the vehicle group, 1/5 mice in the BBP-398 group, and 1/5 animals in the osimertinib group were euthanized due to tumor ulcerations before day 15

All groups dosed QD, PO Two-way repeated-measures ANOVA: \*p< 0.0001 HCC827-ER: HCC827-erlotinib resistant

KYSE-520 tumor PD analysis suggests target coverage for ~16 hrs over  $IC_{50}$  and daily recovery lead to optimal efficacy



Single dose



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Multiple doses

The future of cancer therapy

## In vivo PD in KYSE-520 Tumors (mRNA) Maximum effective dose: 100 mg/kg QD

Decreased expression of MAPK pathway is observed soon after BBP-398 dosing



## DUSP6 (mRNA)

PK/PD relationship and  $IC_{50}$  determination in KYSE-520 treated with BBP-398

 $ED_{90}$  in the HCC827 (EGFR<sup>ex19del</sup> & EGFR<sup>amp</sup>) CDX model confirms time over pERK IC<sub>50</sub> of ~16 hours drives efficacy





Analysis of HCC827 efficacy and PD shows that ~16 hours over pERK IC<sub>50</sub> drives efficacy

Predicted steady-state plasma concentration-time profiles following once daily oral administration of BBP-398





# BBP-398 steady-state PK simulation for optimal efficacy



Maintenance at or above in vivo  $IC_{50}$  for >16 hours of the dosing interval is anticipated with continuous once daily dosing

A BOIN Phase 1 dose escalation with BBP-398 is ongoing: Observed PK/PD is in-line with preclinical predictions







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- BBP-398 is a potent and selective SHP2 inhibitor that demonstrates pathway inhibition across a panel of cell lines with active MAPK signaling
- BBP-398 exhibits monotherapy efficacy in RTK/KRAS-driven xenograft models and synergizes with sotorasib and osimertinib to inhibit in vivo tumor growth
- Pharmacodynamic analysis of target coverage following BBP-398 dosing strongly suggests that ~16 hrs of IC<sub>50</sub> coverage and daily pathway recovery are best for therapeutic index
- Predicted human steady-state plasma concentration-time profiles suggest continuous once daily oral dose of BBP-398 may achieve the desired therapeutic index
- A BOIN Phase 1 dose escalation with BBP-398 is ongoing: Observed PK/PD is consistent with our preclinical prediction