



Notable efficacy of co-treatment with FHD-286, a dual BRG1/BRM ATPase inhibitor, and Menin or BET inhibitor, decitabine or venetoclax against AML with MLLr or mutant NPM1

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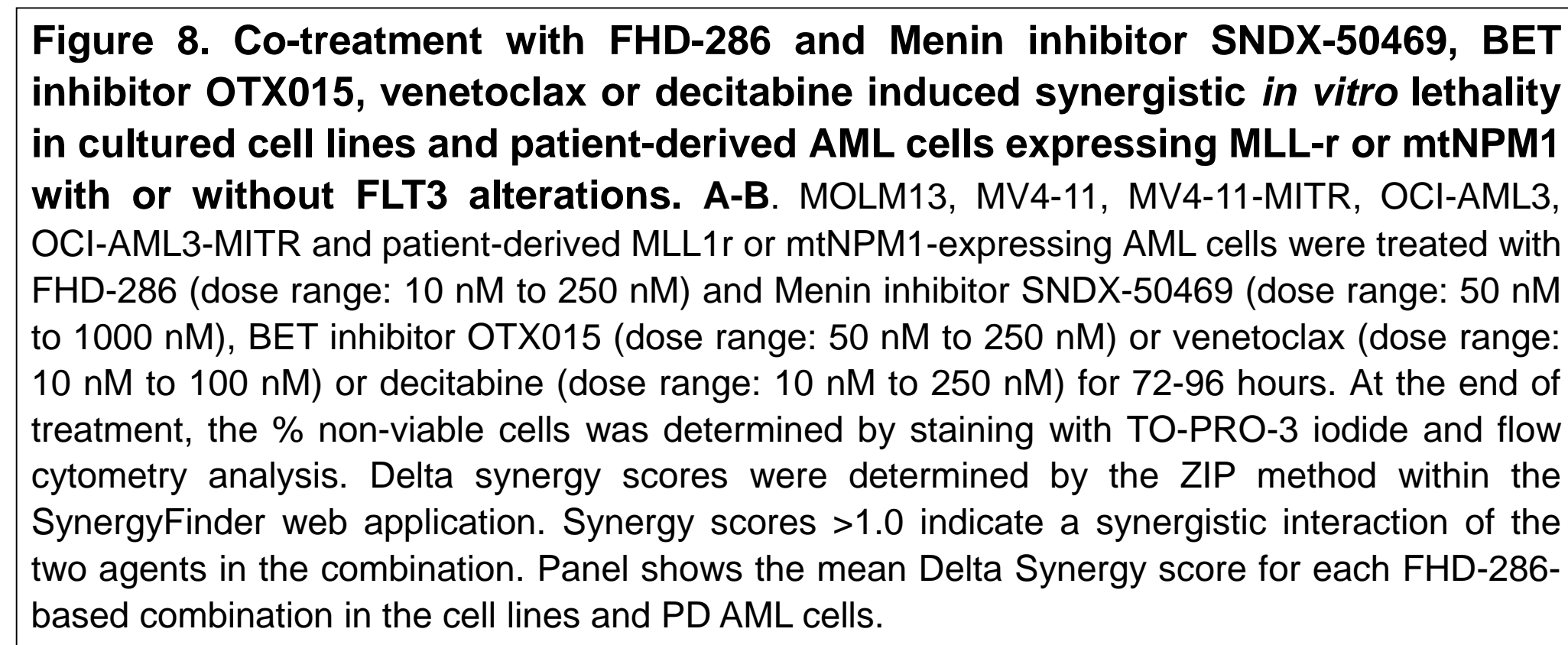
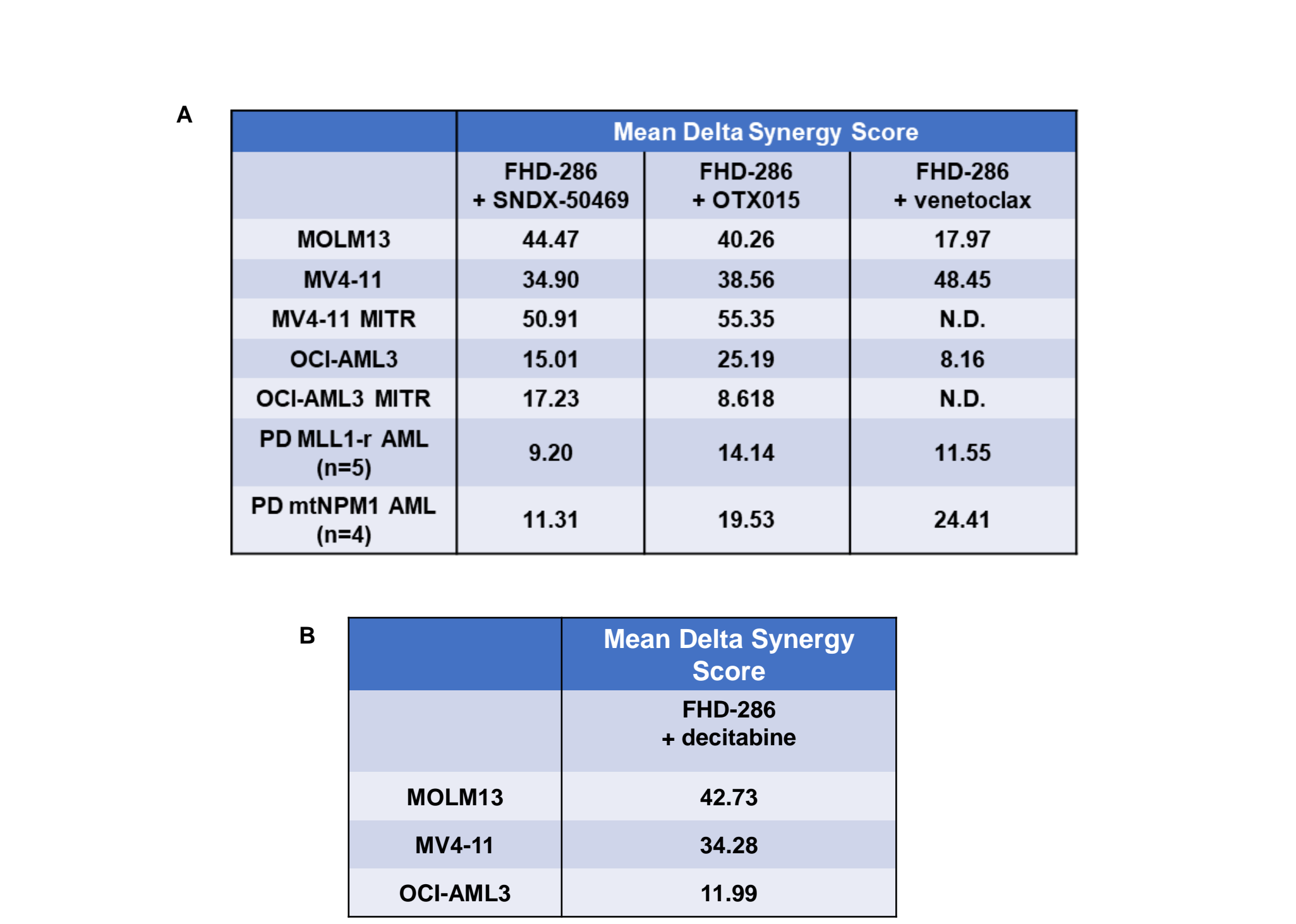
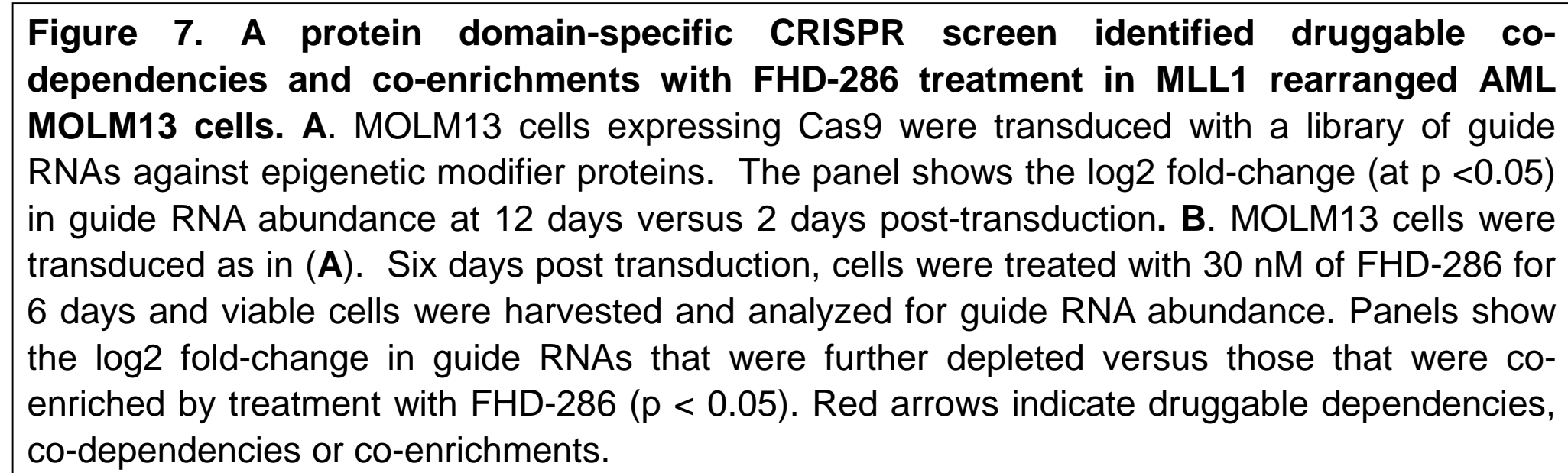
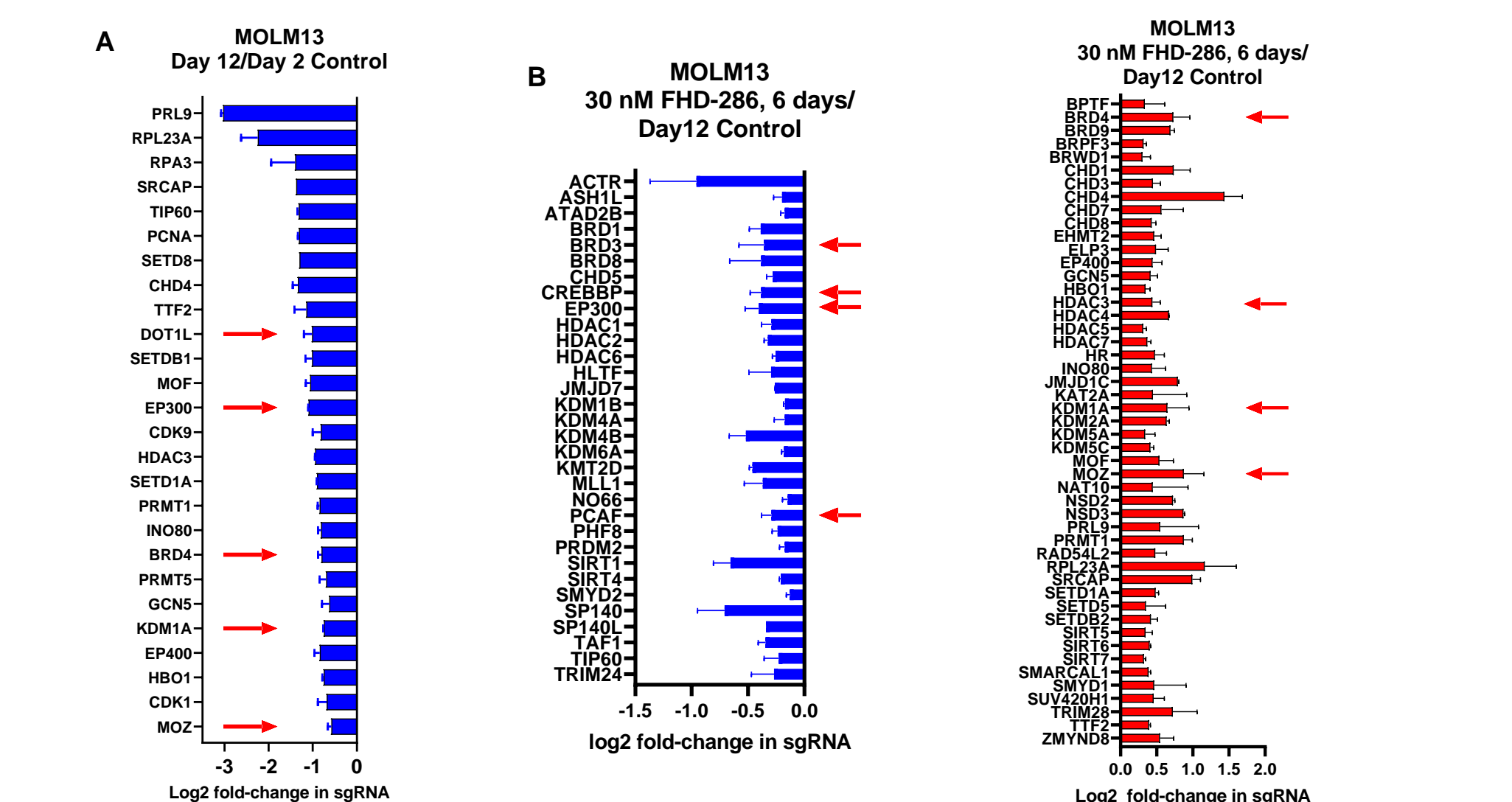
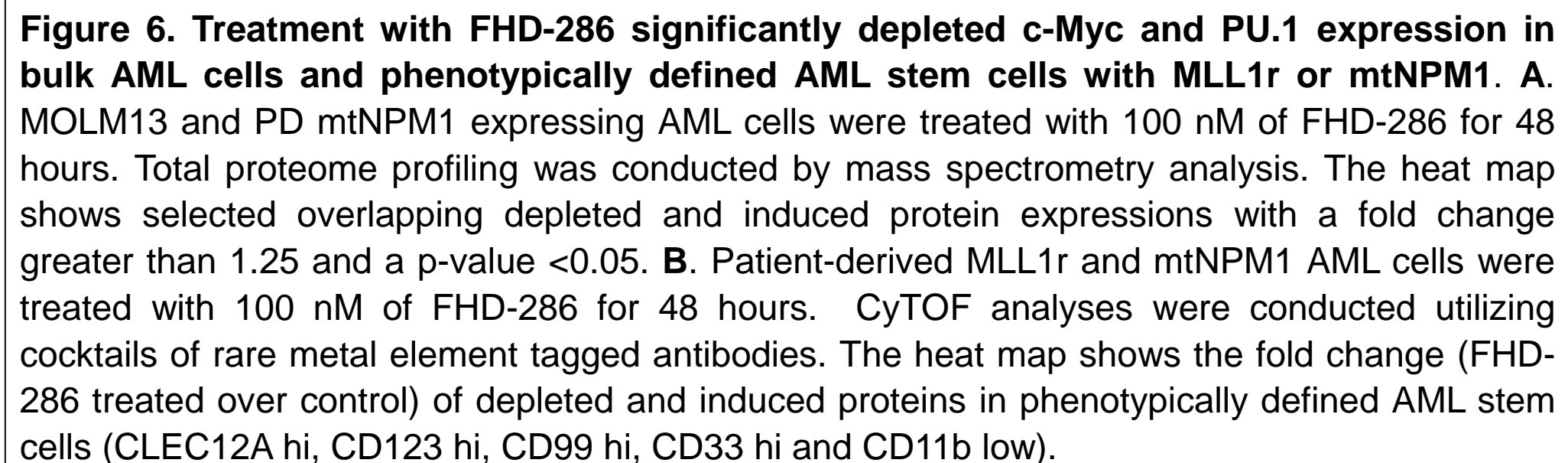
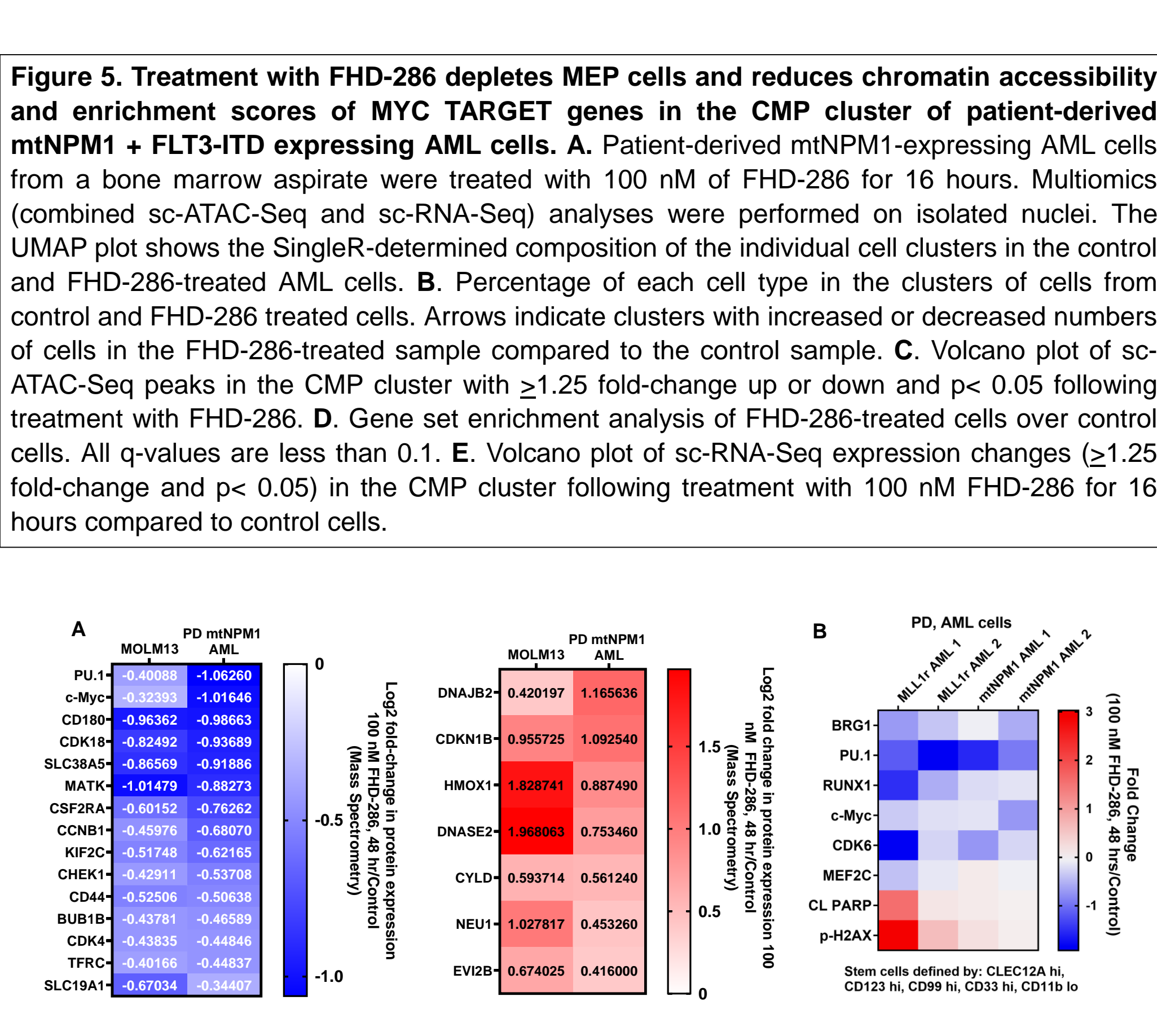
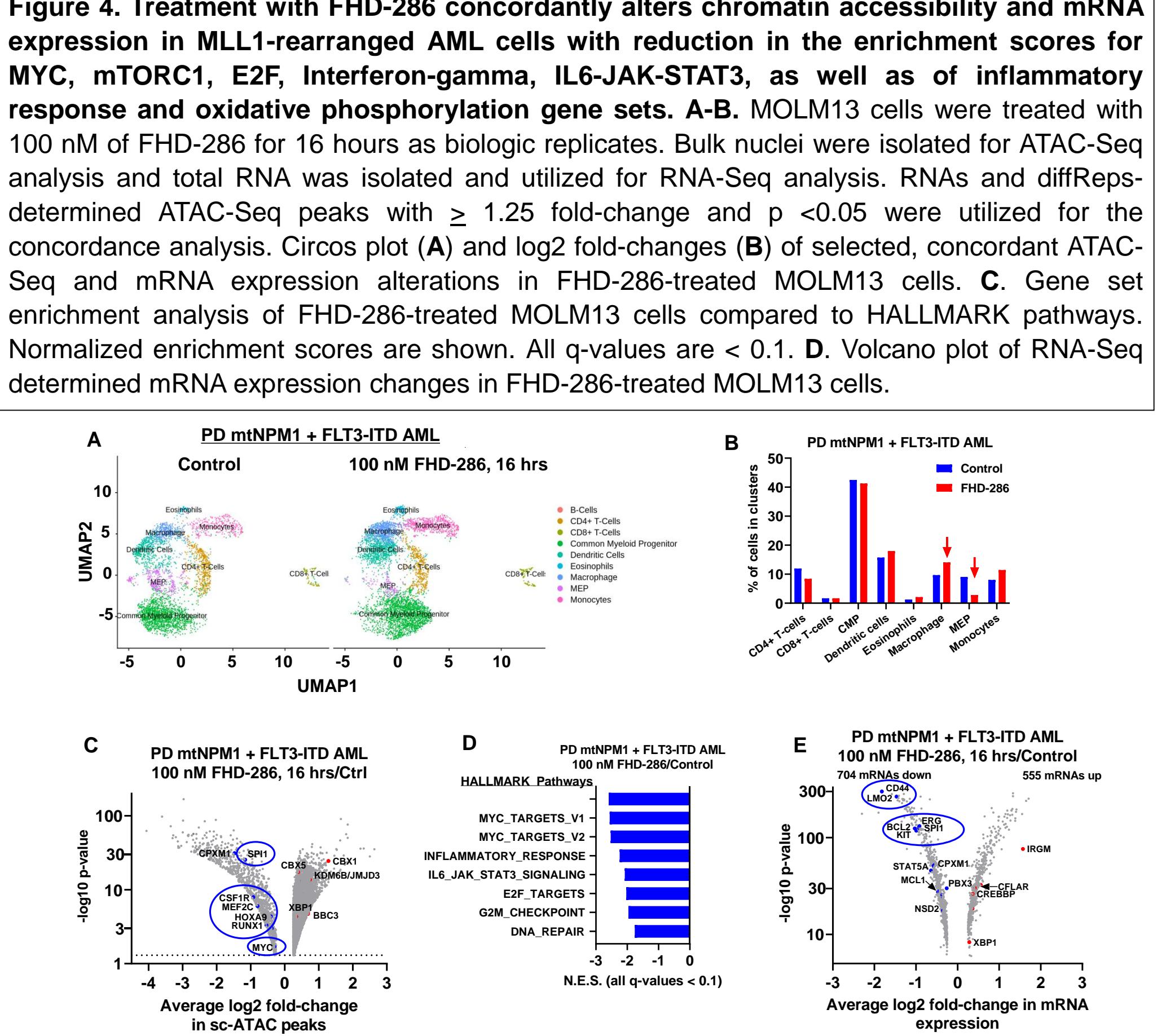
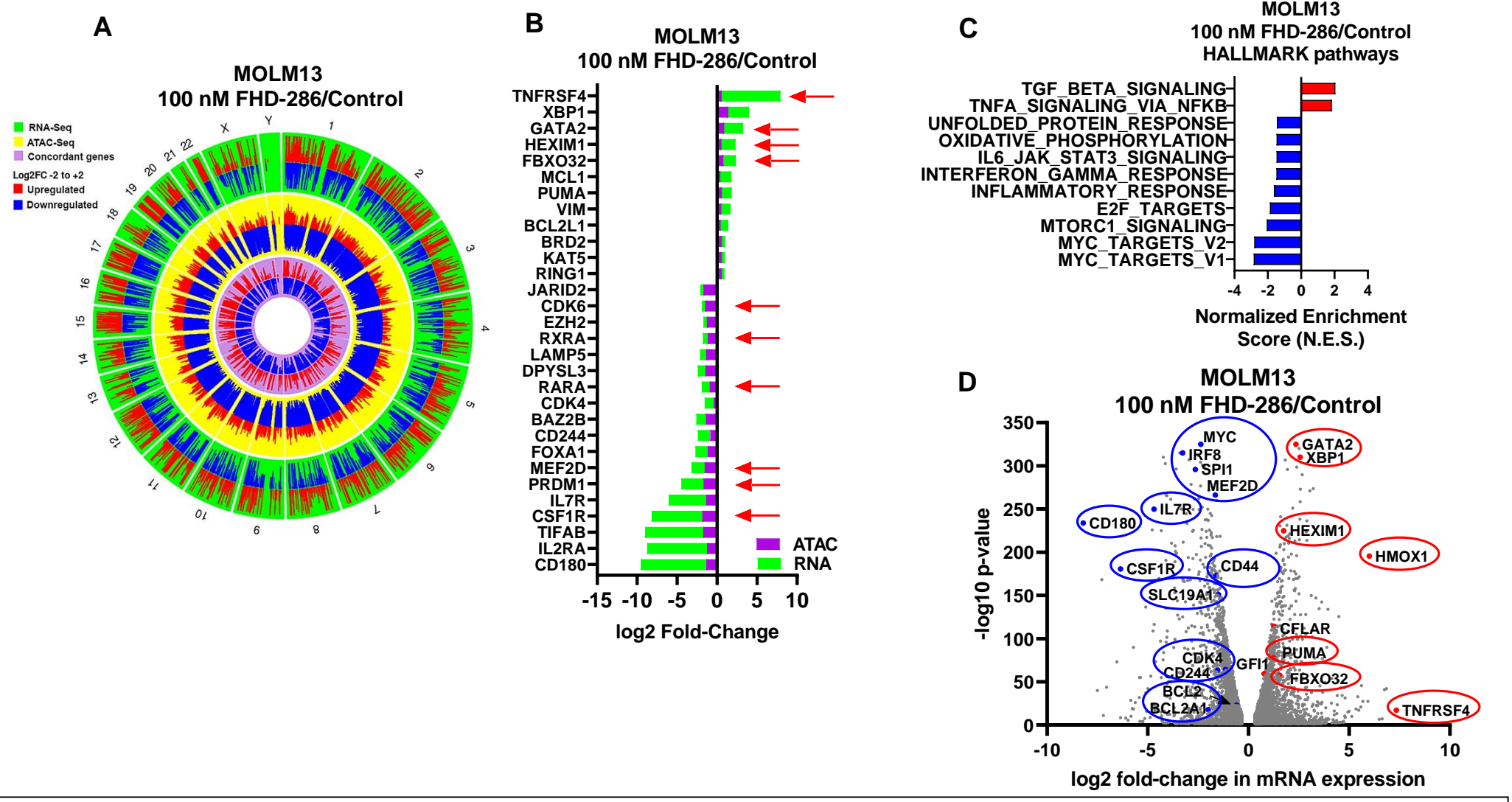
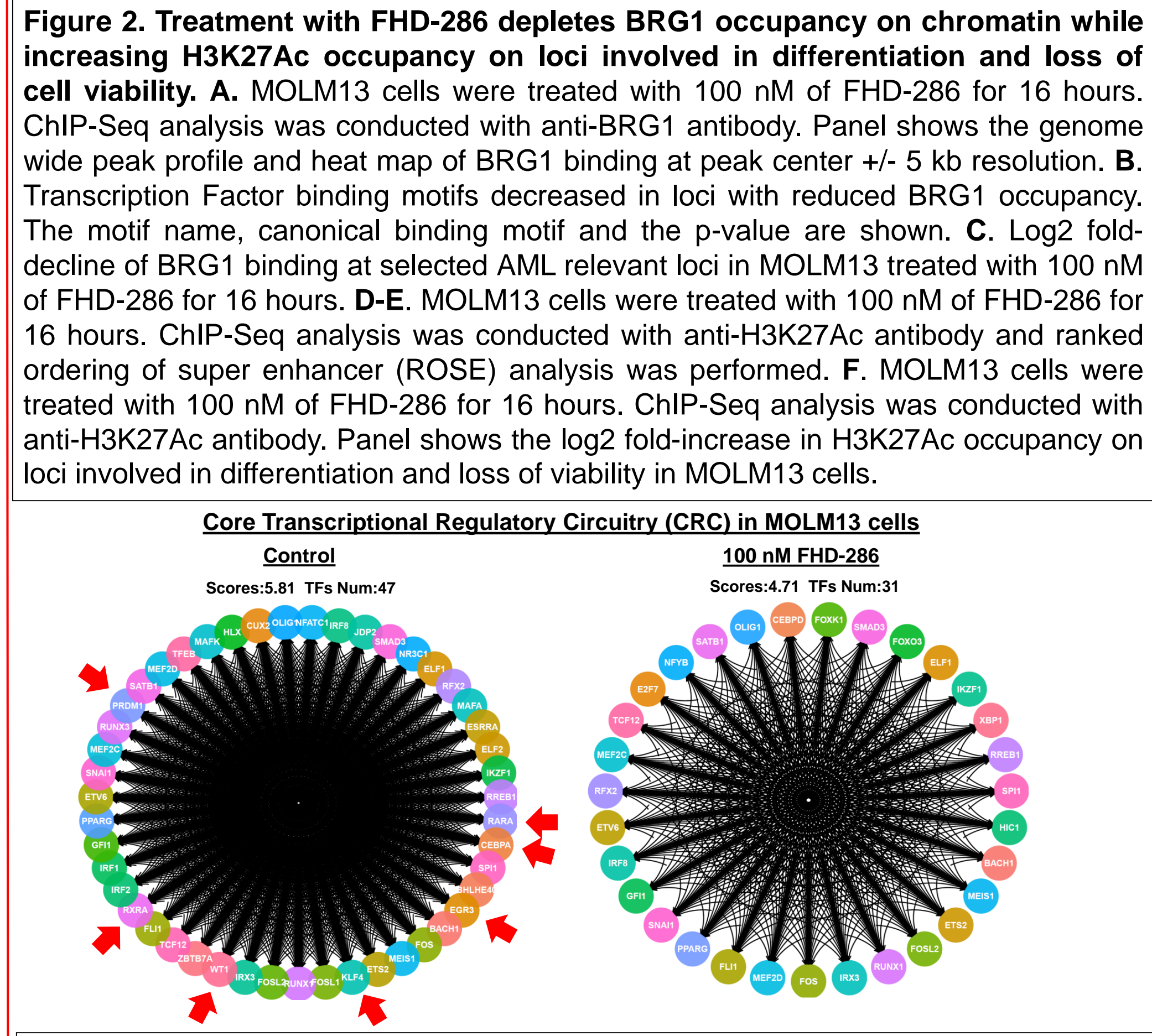
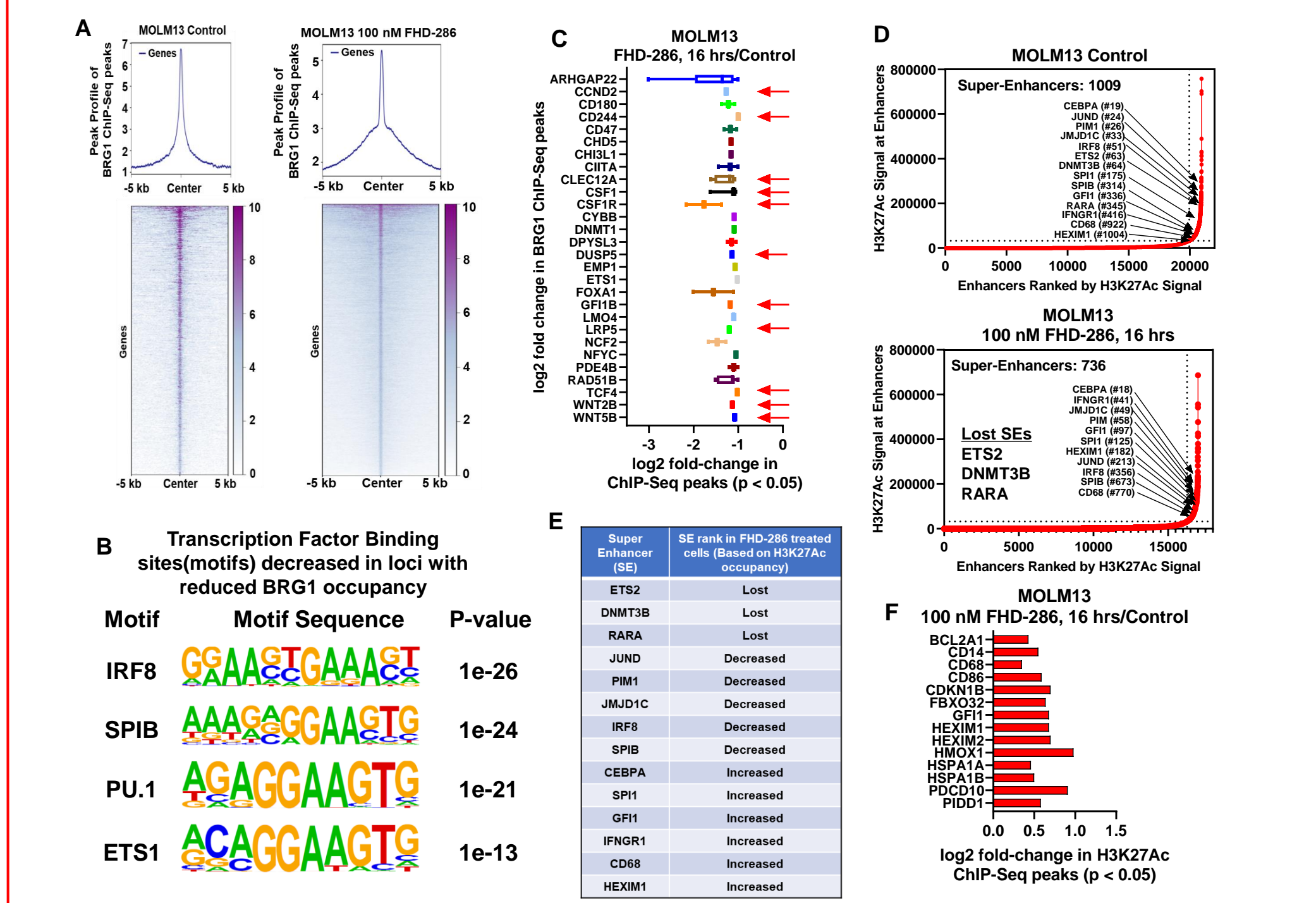
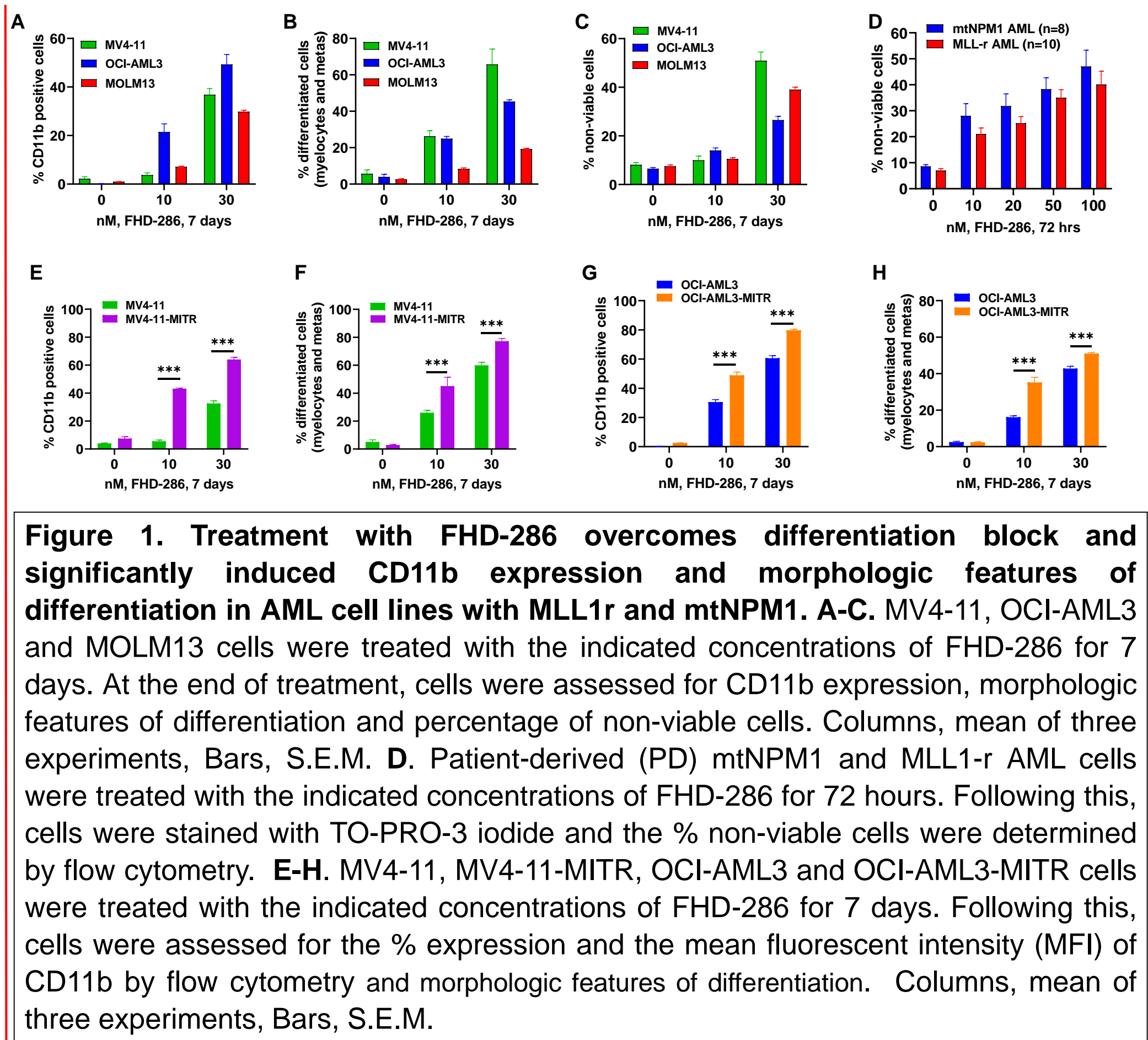
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Introduction

DNA in eukaryotic cells is packaged in nucleosomes and higher order chromatin structures, making it relatively inaccessible to transcriptional machinery. ATP-dependent chromatin-modifying and remodeling complexes allow transcriptional machinery, composed of transcription factors (TFs) and co-factors, to gain access and modulate transcription. Chromatin remodeling complexes, e.g., BAF complex, contain one ATPase, BRG1 (SMARCA4) or BRM (SMARCA2), and several other factors. The BAF (BRG1/BRM-associated factor) complex is essential for lineage specific gene expression by TFs and for hematopoiesis. Expression and dependency on BRG1/BRM have also been documented for AML cells. Mutations in BRG1 and other BAF complex components are common and mechanistically involved in various cancer types. Recently, cancer cells with mutation and reduced expression of BRG1 were shown to be dependent for survival on the BRM activity of the BAF complex. BRM depletion was shown to selectively inhibit *in vitro* and *in vivo* growth of BRG1 mutant cancer cells. BRG1 and BRM have high protein sequence homology, and both contain the core catalytic ATPase domain that drives chromatin remodeling. BRG1 and BRM also contain a bromodomain, which is not a dependency in cancer cells. Small molecule inhibitors of dual BRM and BRG ATPase activity have been developed, which repress BRG1/BRM-dependent gene-expression and growth of cancer cells. FHD286 (Foghorn Therapeutics) is a highly potent, selective, small molecule, oral, catalytic enzyme activity inhibitor of BRM and BRG1. FHD286 is active against AML cells. Evaluation of the CRISPR-dependency screen map (DepMap) showed greater dependency of numerous AML cell lines on SMARCA4 expression. FHD-286 is currently being evaluated in AML for clinical efficacy in early clinical trials.* However, it is unclear which of the genetically characterized AML subtypes, including those associated with poor clinical outcome, would be susceptible or resistant to FHD286. Gene expression signature (GES) of FHD286 activity also needs to be elucidated and tested. In the present studies, we interrogated the *in vitro* and *in vivo* efficacy of FHD-286 in inducing differentiation and loss of viability, as well as their molecular correlates in AML cell lines and patient-derived (PD) AML cells. Exposure to FHD-286 overcame differentiation block and significantly induced CD11b expression and morphologic features of differentiation in AML cell lines with MLL-r or mtNPM1. This was followed by a loss of viability of the differentiated AML cells. FHD-286 treatment also induced significant loss of viability in PD AML cells. Following treatment FHD-286, RNA-Seq analysis of MOLM13 cells demonstrated significant reduction in the normalized enrichment scores for expressions of gene-sets of targets of MYC, mTORC1, E2F, Interferon-gamma, IL6-JAK-STAT3, inflammatory response and oxidative phosphorylation genes. QPCR analyses determined significant reduction in mRNA expression of MYC, SPI1 and BCL2 genes. Western analyses showed that treatment with FHD-286 significantly increased p21, p27, PU.1 and CD11b expressions, while reducing expressions of c-Myc and BCL2. Based on these observations, and clinical efficacy of the combination of venetoclax and decitabine/azacitidine, we determined *in vitro* lethal activity of co-treatment with FHD-286 and venetoclax or decitabine against AML cell lines and PD AML cells. Notably, co-treatment with FHD-286 and venetoclax or decitabine exerted synergistic lethality against AML cell lines and PD AML cells, especially those expressing MLL-r, mtNPM1 or EVI1. Based on the known efficacy of the Menin inhibitor SNDX-50469 in AML with MLL-r or mtNPM1, we also found that co-treatment with FHD-286 and SNDX-50469 was synergistically lethal against AML cell lines and PD AML cells with MLL-r or mtNPM1. Since treatment with BET (bromodomain and extraterminal) protein inhibitor also inhibits c-Myc and BCL2 expression and was shown to be lethally active in AML cells with MLL-r or mtNPM1, we also found that co-treatment with FHD-286 and BET protein inhibitor OTX015 exerted synergistic lethality against AML cell lines and PD AML cells with MLL-r or mtNPM1. We also determined that *ex vivo* and *in vivo* treatment with FHD-286 attenuated AML initiating stem cells in PDX models with mtNPM1 and FLT3-ITD. Finally, in luciferase-transduced, patient-derived xenograft (PDX) models of AML cells with MLL-AF9 and FLT3, or mtNPM1 and FLT3-ITD, we determined that treatment with FHD-286 administered orally alone was significantly effective in reducing AML burden and improving overall survival of the mice. Additionally, co-treatment with FHD-286 and venetoclax, decitabine, OTX015 or Menin inhibitor SNDX-5613, as compared to each drug alone or vehicle control, significantly reduced the AML burden and improved median and overall survival of the NSG mice, without inducing significant toxicity. Taken together, these findings highlight the promise of FHD-286 treatment alone and in rational combinations in exerting significant anti-AML efficacy against cellular models of AML, especially those with MLL-r, mtNPM1 or chromosome 3q26 lesions and EVI1 overexpression.

* Please visit <https://foghornrx.com/> for current clinical status.

Results



Conclusions

1. Treatment with FHD-286 for up to 7 days overcame differentiation block and significantly induced CD11b expression and morphologic features of differentiation in AML cells with MLL-r or mtNPM1 including those with resistance to Menin inhibitor.
2. RNA-Seq analysis of AML cells treated with FHD-286 demonstrated significant reduction in the normalized enrichment scores for expressions of gene-sets of targets of MYC, mTORC1, E2F, Interferon-gamma, IL6-JAK-STAT3, inflammatory response and oxidative phosphorylation genes.
3. Compared to treatment with FHD-286 or venetoclax, decitabine, or OTX015 or vehicle control, co-treatment with FHD-286 and venetoclax, decitabine, or OTX015 exerted superior *in vivo* anti-AML efficacy without any host toxicity in a PDX model of MLL-r AML.
4. Compared to treatment with FHD-286, OTX015, SNDX-5613 or vehicle control, co-treatment with FHD-286 and OTX015 or SNDX-5613 exerted superior *in vivo* anti-AML efficacy without host toxicity in a PDX model of mtNPM1 AML.
5. These preclinical findings highlight the promise of FHD-286 treatment alone and in rational combinations in exerting significant anti-AML efficacy against cellular models of AML, especially those with MLL-r or mtNPM1