

APG-2449, a Novel Focal Adhesion Kinase (FAK) Inhibitor, Exhibits Antileukemic Activity and Enhances Lisaftoclax (APG-2575)-Induced Apoptosis in Acute Myeloid Leukemia (AML)

INTRODUCTION

- High FAK expression is associated with increased blast proliferation and poor prognosis in AML.
- Preclinical and clinical studies have demonstrated that selective targeting of BCL-2 has broad antitumor activity against hematologic malignancies, including AML, myelodysplastic syndrome, and chronic lymphocytic leukemia.²
- In AML, resistance to apoptosis induced by BCL-2 inhibition is an urgent unmet medical need. It is partially mediated by preexisting and therapy-induced upregulation of MCL-1 and BCL-xL.³
- Considering the cross-talk between FAK and MCL-1/BCL-xL pathways, we hypothesize that FAK inhibition could downregulate expression of MCL-1 and BCL-xL, and thus enhance activity of a BCL-2 inhibitor (BCL-2i) in both sensitive and insensitive AML cells (**Fig. 1**).
- Lisaftoclax (APG-2575) and APG-2449 are novel BCL-2 and ALK/ROS1/FAK inhibitors with well tolerable safety profiles and potent clinical activity in patients with hematologic and solid malignancies, respectively.^{4,5} Lisaftoclax and APG-2449 are under study as investigational drugs and not yet approved in the United States.

AIM

• The aim of this study was to evaluate whether APG-2449 can enhance lisaftoclax antitumor activity in preclinical models of AML.

METHODS

- AML cells were treated with APG-2449 alone or in combination with lisaftoclax, and cell viability was measured by Cell Titer-Glo[®] luminescent cell viability assays.
- Cellular apoptosis was evaluated by annexin V/propidium iodide staining and flow cytometry.
- Protein expression was measured by western
- The antitumor activity of APG-2449 and lisaftoclax alone or in combination were assessed in AML cell-derived xenografts (CDX) in mice.

- BCL-2i-sensitive and insensitive AML cell lines (Table 1). reduced cell viability and enhanced apoptosis in AML cell
- As a single agent, APG-2449 can inhibit proliferation of APG-2449 combined with lisaftoclax synergistically lines (**Fig. 2**).
- APG-2449 likely antagonized lisaftoclax induced upregulation of MCL-1 and BCL-xL and enhanced the antiproliferative activity of lisaftoclax.
- APG-2449, when used alone or combined with lisaftoclax, decreased activation of FAK and its downstream effectors (**Fig. 3A**). Silencing FAK with siRNA enhanced the antiproliferative effect of lisaftoclax in AML cells (Fig. 3B). APG-2449 synergistically enhanced the antitumor effect of lisaftoclax in both MV4-11 and OCI-AML-3 AML CDX
- xenograft models (Fig. 4).



(APG-2575) in AML

Table1. Antiproliferation effect of APG-2449 in AML cell lines

	Cell line	IC_{50} (µM), Mean \pm SD, n = 2		
BCL-2i sensitive	MV4-11	1.25 ± 0.22		
	ML-2 0.88±0.61			
	MOLM-13	1.29 ± 0.35		
	HL-60	1.23 ± 0.20		
BCL-2i resistant	OCI-AML-3	6.73±2.77		

- augments the antileukemic activity of lisaftoclax in AML. This synergistic effect can be partially attributed to suppression of MCL-1/BCL-xL by FAK downstream pathways. This novel combination showed synergistic antileukemic activity in both BCL-2 inhibitor-sensitive and -insensitive AML cells *in vitro* and in xenograft models. Overall, these promising results provide a novel approach to the clinical development of lisaftoclax for treatment of
- Our data suggest that FAK inhibition by APG-2449 patients with AML.

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RESULTS

Fig. 1. Potential mechanism of the synergy between APG-2449 and lisaftoclax

CONCLUSIONS



Annexin V-FITC

Fig. 2. APG-2449 and lisaftoclax (APG-2575) have synergistic effects in both BCL-2i-sensitive and resistant AML cell lines. (A) AML cells were treated with indicated concentrations of APG-2449 and APG-2575 for 72 hours. Cell Titer Glo was used to evaluate cell viability. (B) AML cells were treated with APG-2449 alone or combined with APG-2575. Induced cell apoptosis was evaluated by flow cytometry with Annexin V-FITC and PI Staining. Values are presented as mean \pm SD (n = 2 replicates), using one-way ANOVA test with Tukey's method for multiple comparison.

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Fig. 3. APG-2449 antagonized lisaftoclax (APG-2575)-induced upregulation of MCL-1 and BCL-xL. (A) FAK and downstream pathway expression were evaluated by western blot analysis. (B) siRNA-mediated FAK knock-down suppressed MCL-1 and BCL-xL expression and sensitized the antiproliferation of APG-2575 in OCI-AML-3. Values are presented as mean \pm SD (n = 3 replicates), *p < 0.05, vs. Scramble.

OCI-AML-3

MV4-11



Group	RTV@Day 22	T/C@Day 22		Group	RTV@Day 17	T/C@Day 17
Vehicle control	9.7±1.2	-		Vehicle control	14.01 ± 3.47	-
APG-2449 100		67		APG-2449 100	1171 ± 0.87	83.61
mg/kg	0.J±1.0	07		mg/kg		00.01
APG-2575 50	5 5 ± 0 7	EG	•	APG-2575 75	1373+125	98.02
mg/kg	5.5±0.7	30		mg/kg	10.70 - 1.20	30.02
Combination	1.89±0.26 ^{****} ###\$\$\$\$	26		Combination	8.00±0.46 ^{****##\$\$\$\$}	57.1

Fig. 4. APG-2449 synergistically enhanced the antitumor effect of lisaftoclax (APG-2575) in vivo. (A-B) MV4-11 and OCI-AML-3 human AML tumor-bearing mice were treated with APG-2449, lisaftoclax, both agents, or vehicle. Relative tumor volume changes are shown in tables, mean \pm SD (n = 6 or n = 8). **** p < p0.0001, vs. vehicle; ##p < 0.01, ###p < 0.001, vs. APG-2449 100 mg/kg; \$\$\$\$p < 0.0001 vs. APG-2575 50 mg/kg or APG-2575 75 mg/kg. Synergy ratio = $[T/C_{(APG-2449)}]^*[T/C_{(APG-2575)}]/[T/C_{(combination)}]$. Synergy: Ratio > 1, synergistic; Ratio = 1, additive; Ratio < 1, antagonistic.

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