

YPN-005, an oral CDK7 inhibitor, shows a significant antitumor activity in Myc amplified solid tumors and MCL-1 overexpressed blood cancers

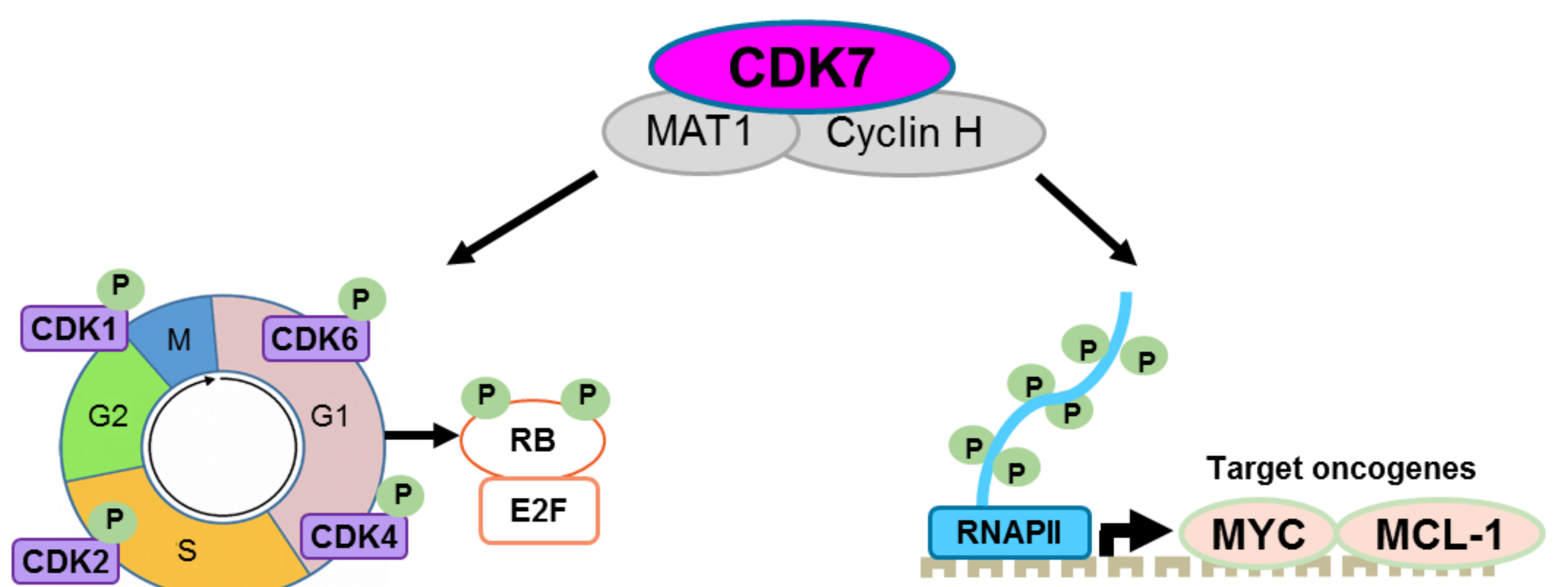
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Introduction

- CDK7 as a promising anti-cancer target regulates cell cycle progression through the regulation of cell-cycle proteins, and gene transcription through the regulation of RNA polymerase II (RNAPII)
- CDK7 causes transcriptional activation of oncogenes Myc and MCL-1
- Myc amplification in solid tumors is correlated with tumor aggression and poor therapeutic outcome
- MCL-1 is shown to be critical to the development and maintenance of hematological cancers
- YPN-005 shows potential as a therapeutic agent across both solid tumor cells as well as hematological cancer cells via Myc and MCL-1 downregulation and cell cycle arrest
- YPN-005 is currently being evaluated in treatment for hematological cancers via the intravenous route and closely followed in development for solid cancers via the oral route

CDK7 pathway plays a key role in cancer

CDK7 regulates cell cycle progression and gene transcription: the transcriptional activation of oncogenes



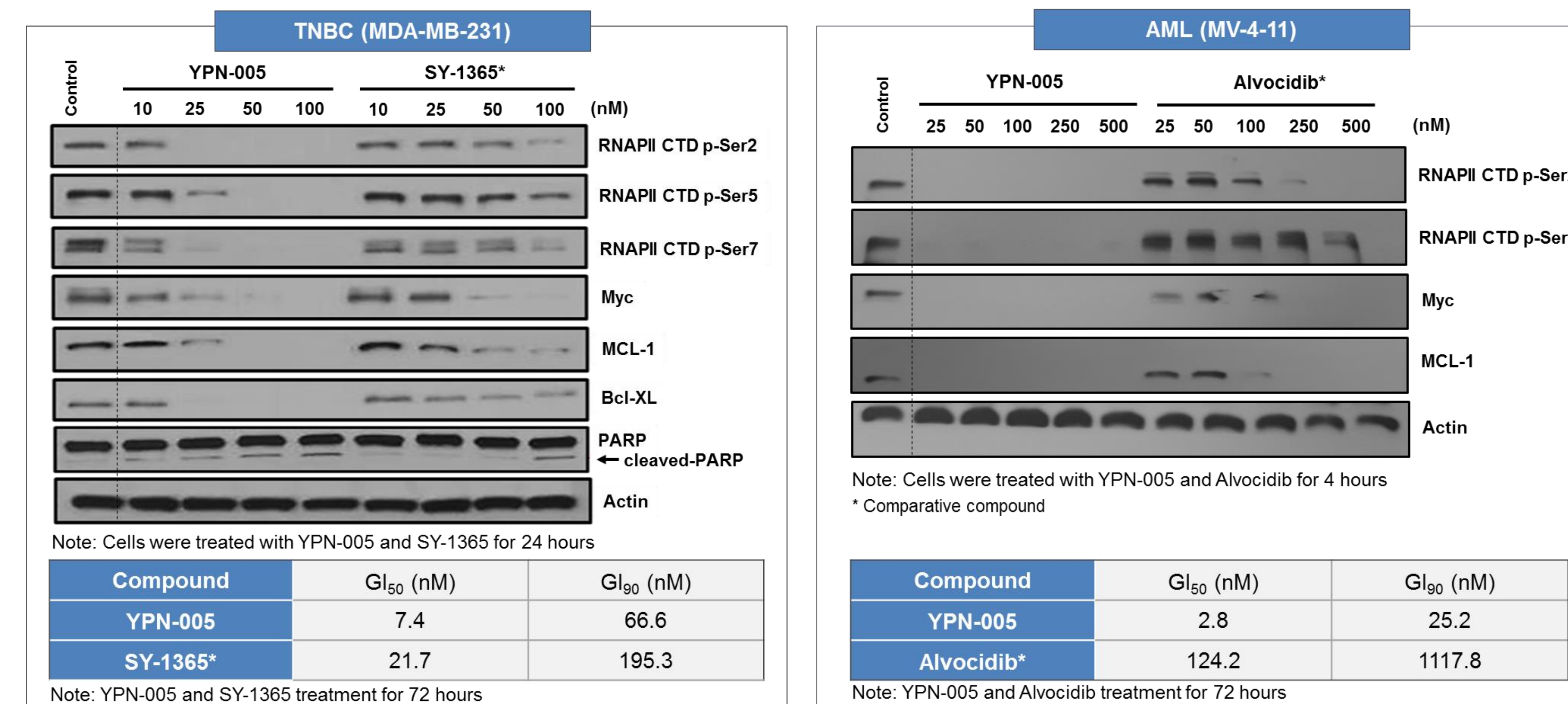
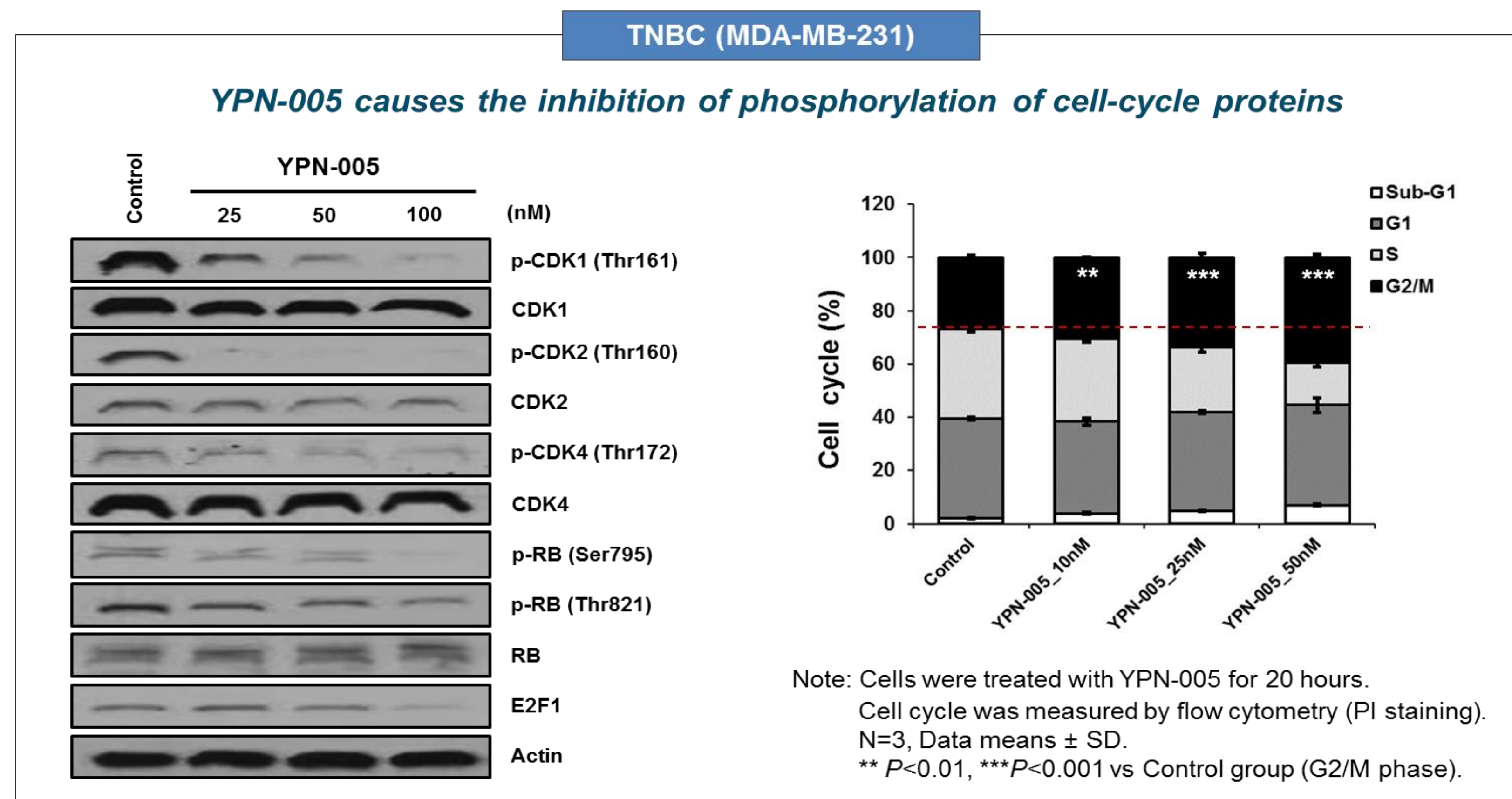
I. Cell-cycle regulation

- Via activation of downstream CDKs (CDK 1, 2, 4, and 6)

II. Transcriptional activation of oncogenes

- Via RNA polymerase II phosphorylation

YPN-005 inhibits cell cycle signaling leading to the induction of apoptosis and the disruption of Myc and MCL-1 expression



YPN-005 inhibits Myc/MCL-1 expressing cancer cell growth

Myc (+) solid tumor cells

Cell line	GI ₅₀ (nM)	GI ₉₀ (nM)	Origin
MDA-MB-468	11.2	100.8	Breast (TNBC)
MDA-MB-231	7.4	66.6	Breast (TNBC)
HCC70	11.2	100.8	Breast (TNBC)
MCF-7	15.1	135.9	Breast (ER+/Her-)
HepG2	4.4	39.6	Liver (HCC)
Hep3B	6.4	57.6	Liver (HCC)
Huh7	11.6	104.4	Liver (HCC)
OVCAR-3	4.8	43.2	Ovary
SKOV-3	9.6	86.4	Ovary
BxPC-3	6.7	60.3	Pancreas
LNCAp	8.0	72	Prostate
DU145	11.5	103.5	Prostate

MCL-1 (+) hematological cancer cells

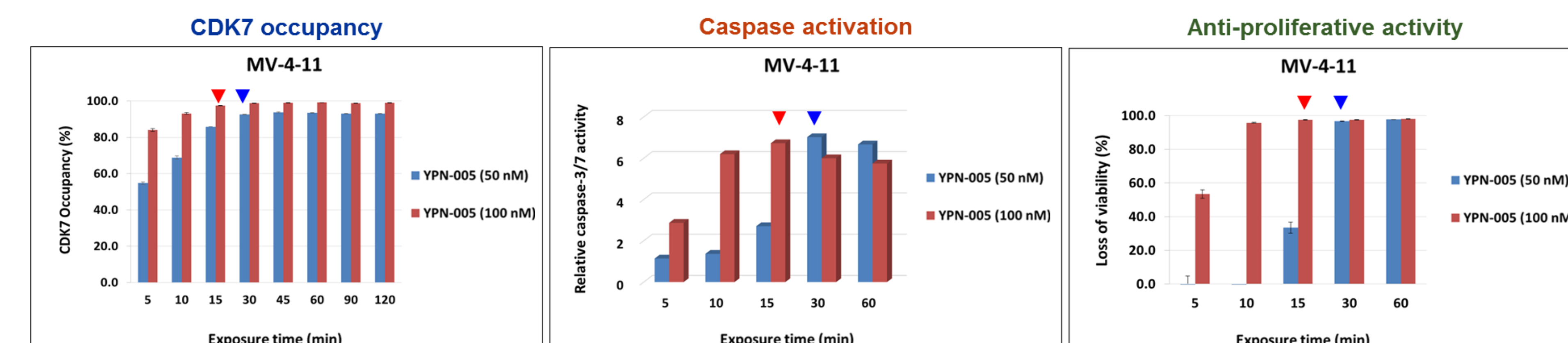
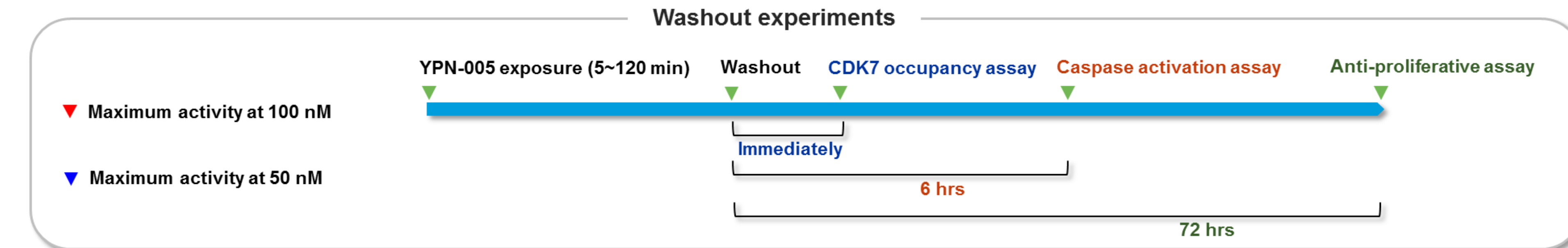
Cell line	GI ₅₀ (nM)	GI ₉₀ (nM)	Cell line	GI ₅₀ (nM)	GI ₉₀ (nM)
MOLM-13	19.0	170.9	CCRF-CEM	15.6	140.7
MOLM-14	2.8	24.9	JURKAT	17.5	157.2
MV4-11	11.8	106.4	MOLT4	4.5	40.6
OCI-AML2	7.7	69.7	DAUDI	9.2	82.4
THP-1	2.0	17.6	SR	5.8	52.5
U937	2.4	21.9	K562	18.9	170.1
KG-1	29.0	261.4	MEG-01	4.0	36
SKM-1	25.0	225.4	KU-812	3.6	32.8
BDCM	2.7	24.1	RPMI-8226	16.4	147.9
NB4	12.9	116.4	MOLM/AZA-1	13.2	118.7
RCH-ACV	4.1	36.9	MOLM/DEC-5	14.9	134.2
TOM-1	4.4	39.2	THP/DEC-2	3.6	32.4
NALM-20	18.6	167	MOLM/CYT	0.9	8.5
KASUMI-2	6.3	56.3			

Note: YPN-005 treatment for 72 hours

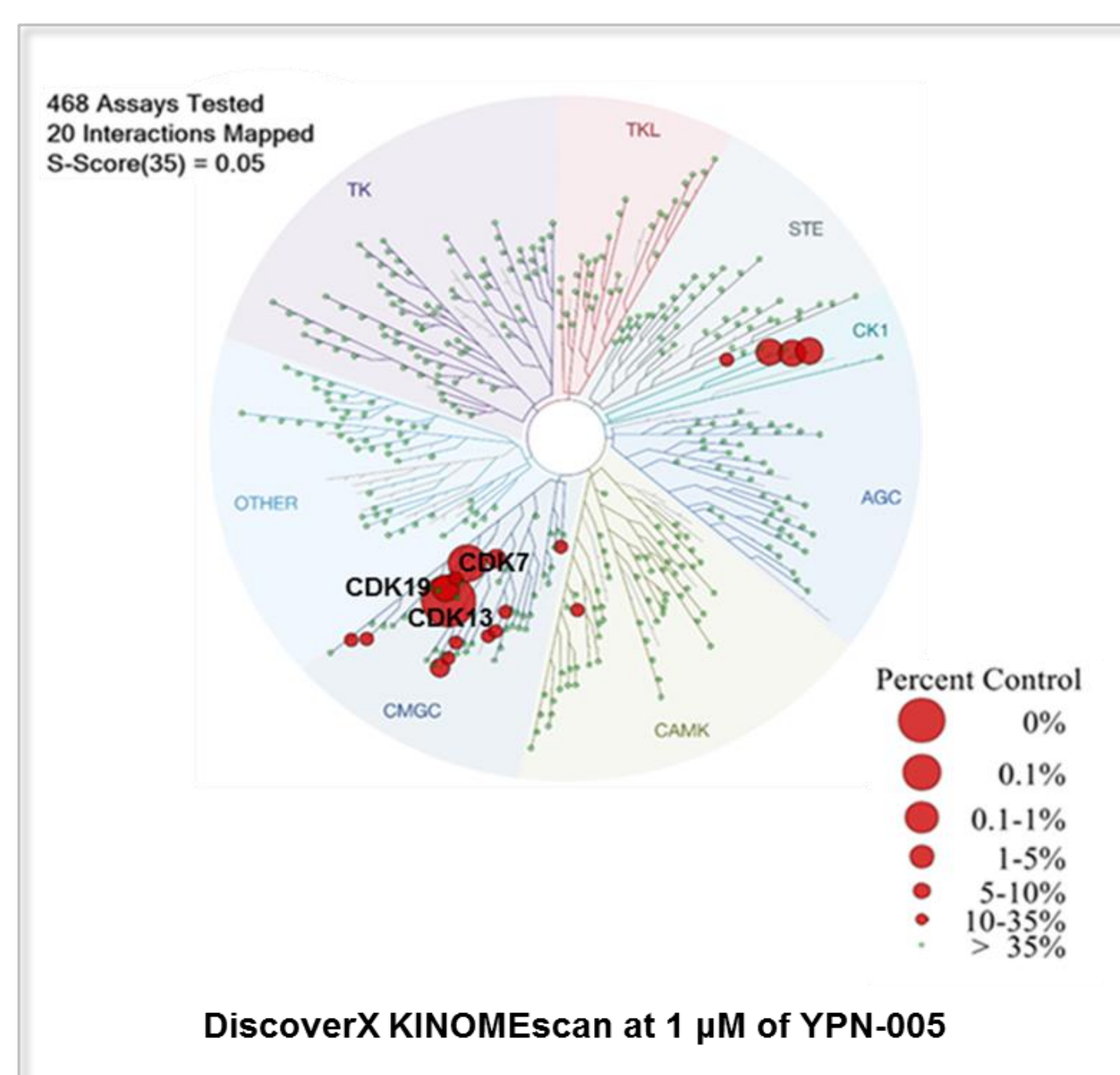
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CDK7 occupancy is correlated with antitumor activities

15 - 30 minutes exposure of YPN-005 was sufficient to achieve the maximal in vitro activities including CDK7 occupancy, caspase activation and anti-proliferative activity



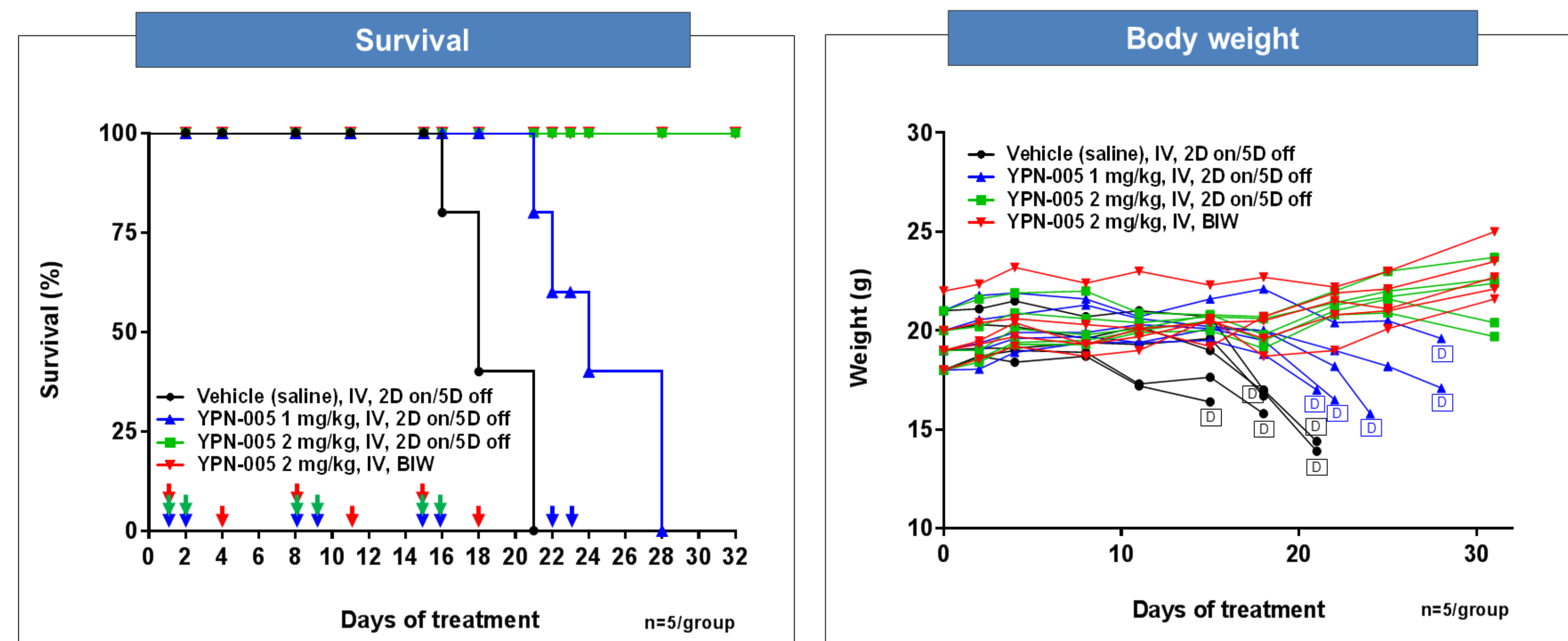
YPN-005 is a potent and selective CDK7 inhibitor



CDK	%Control at 1 μM	¹ Kd (nM)	² IC ₅₀ (nM)
CDK1	100	³ NC	NC
CDK2	80	NC	NC
CDK3	95	NC	NC
CDK4	97	NC	NC
CDK5	70	NC	NC
CDK6	100	NC	NC
CDK7	0.25*	5.1*	31**
CDK8	21	570	NC
CDK9	82	NC	NC
CDK10	63	NC	NC
CDK11B	100	NC	NC
CDK12	11	9.7	> 1,000
CDK13	0	2.1	> 1,000
CDK14	73	NC	NC
CDK15	30	180	NC
CDK16	16	91	NC
CDK17	52	NC	NC
CDK18	60	NC	NC
CDK19	1.4	170	NC

¹ KINOMEScan™ (DiscoverX); ² KinaseProfiler™ (eurofins); ³ NC: Not calculated
 * CDK7 only (Binding assay)
 ** CDK7/cyclinH/MAT1, Km ATP (Radiometric assay)

YPN-005 shows antitumor efficacy in MOLM-13 orthotopic AML model



NSG mice (Jackson Laboratory) were injected (i.v.) via the tail vein with MOLM-13-GFP cells. The day after mice were treated with YPN-005 at 1 mg/kg (2 days on/5 days off for 4 cycles) and 2 mg/kg (2 days on/5 days off or biweekly for 3 cycles). Survival durations observation is ongoing. (D: dead animals)

Conclusions

- YPN-005: Novel oncology product candidate for multiple solid and hematological cancer indications
- A potent, selective, irreversible, and orally available CDK7 inhibitor
- Myc and MCL-1 downregulation and cell cycle arrest
- Rapid induction of apoptosis and subsequent cell death
- Dose dependent antitumor responses without weight loss in AML orthotopic models

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