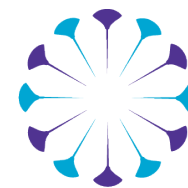


October 6, 2021

Development of a novel hydroxyl dendrimer SPECT tracer, ^{111}In -D6-B483, for selective imaging of brain tumors

R. Sharma¹, R. Coelho², S. Appiani La Rosa¹, C. Lee²,
S. Alters³, P. McConville², & J.L. Cleland¹

1. Ashvattha Therapeutics, Inc
2. Invicro, Inc
3. Alters Biosciences

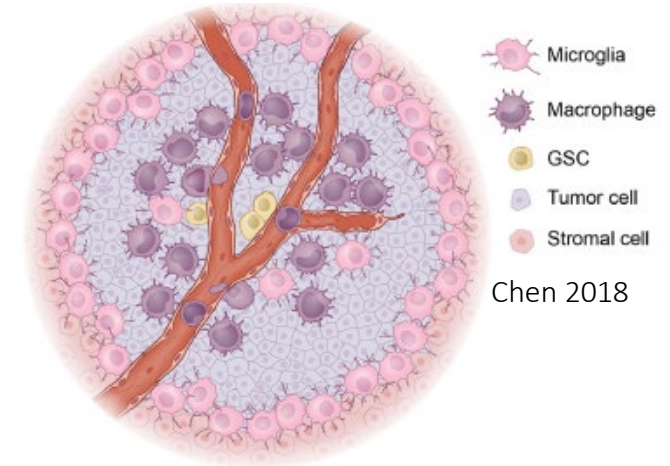


Ashvattha
THERAPEUTICS

Neuro-Oncology Imaging & Radiotherapy Challenges

- Inability of radiotracers to cross blood brain barrier (BBB)
- Lack of specificity for only tumor tissue compared to normal tissue in brain
- Variable expression of radiotracer target across patients and tumor types
- Inability to image and treat brain metastases at early stage (single met) without false positives
- Radiation fraction in the brain tumor for radiotherapy insufficient to reduce tumor burden

Glioblastoma

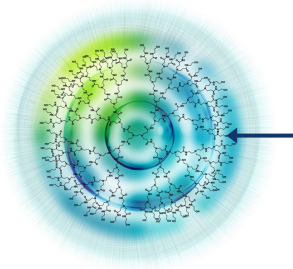


Reactive Microglia & Macrophage

Disease Cell-targeted Precision Medicine

PROPRIETARY PLATFORM

Hydroxyl Dendrimer (HD)
< ½ size of antibody



Water-like surface

- Selective uptake: disease cell-targeted
- Systemic delivery with local sustained effect
- Crosses tissue barriers

Optimal for Intracellular Targets

MULTIPLE THERAPEUTIC AREAS



NEUROLOGY



OPHTHALMOLOGY



NEURO-ONCOLOGY

Crossing tissue barriers:
(blood/brain or blood/retinal)

7 Animal Species + Human Data

CLINICAL STAGE

OP-101:
2 Phase 1 Studies (HV)
Phase 2 Study (COVID)
Well-tolerated

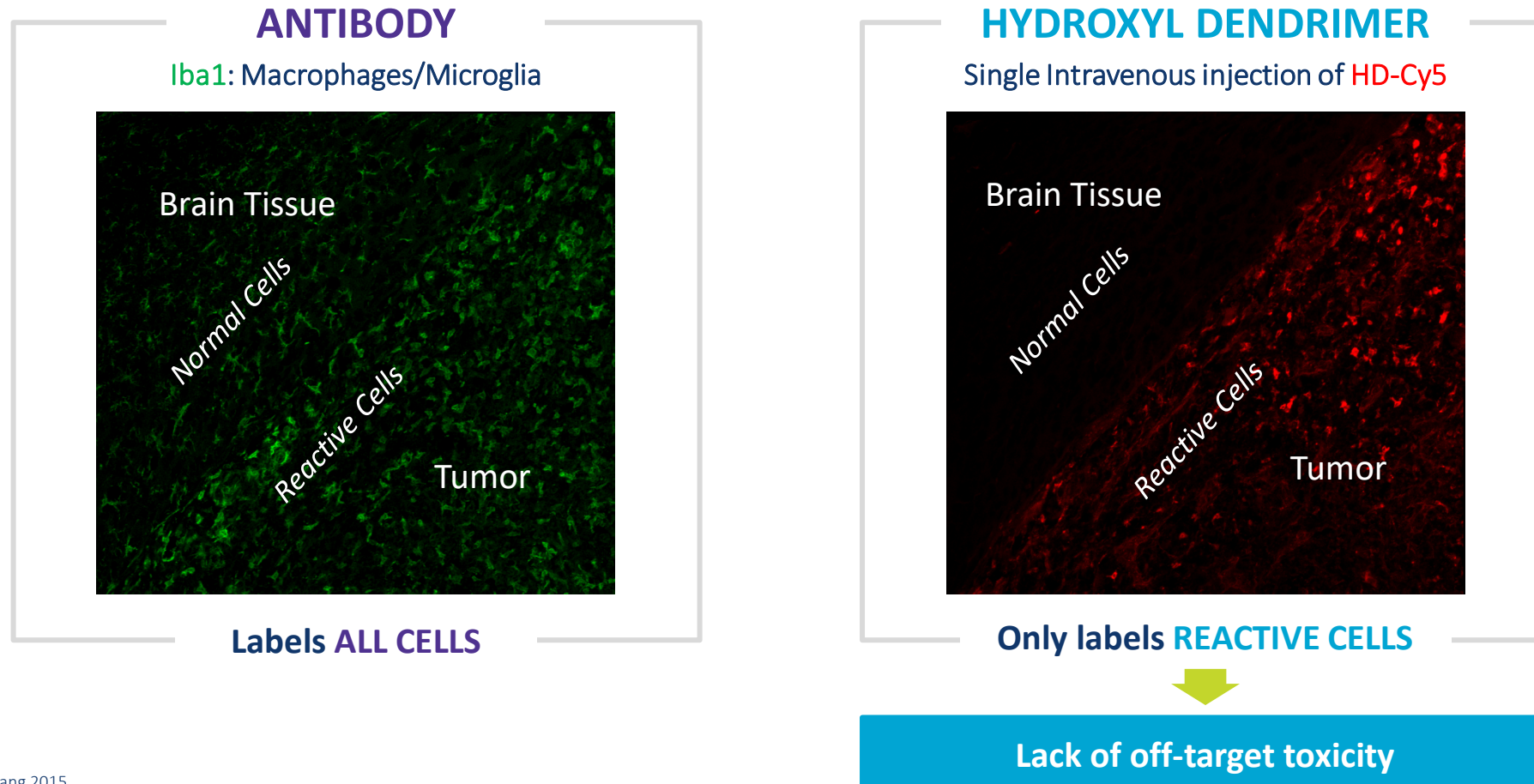
OP-801:
IND in Q4 '21 (ALS)

D-4517.2:
Phase 1 (HV) in Q4 '21

Crosses Tissue Barriers and Selective Uptake by Reactive Microglia & Macrophages

Selective: HDT Uptake Only in Reactive Cells

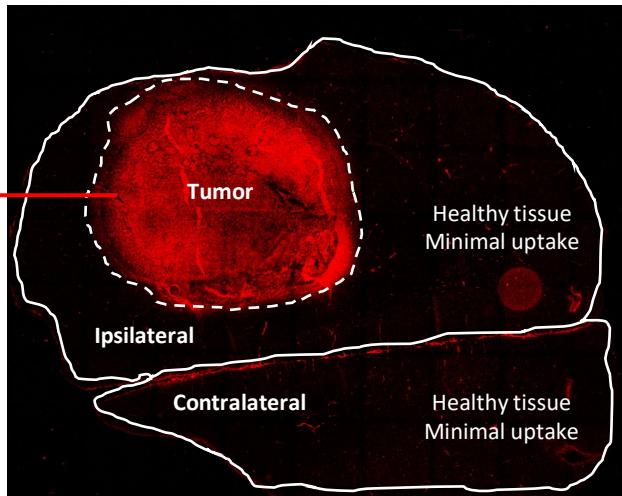
TUMOR ASSOCIATED MACROPHAGES Glioblastoma Orthotopic Tumor Model In Rat



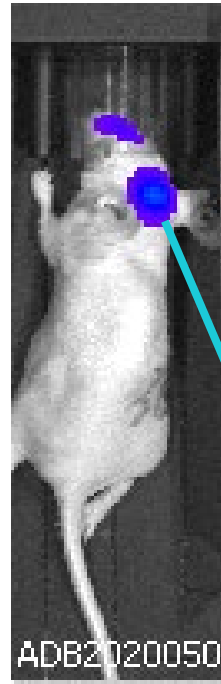
Selective Uptake By Tumor Associated Microglia and Macrophages



BRAIN TUMORS (Glioblastoma Model in Rat)

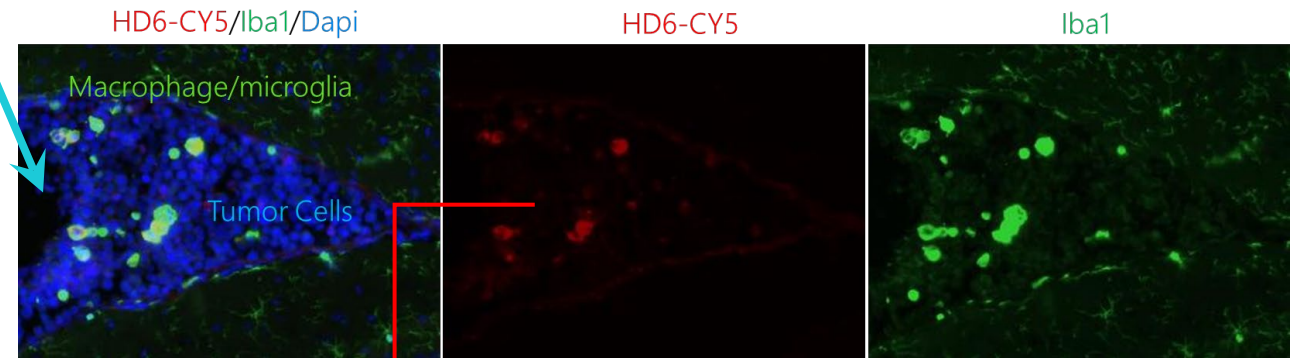


Liaw 2019



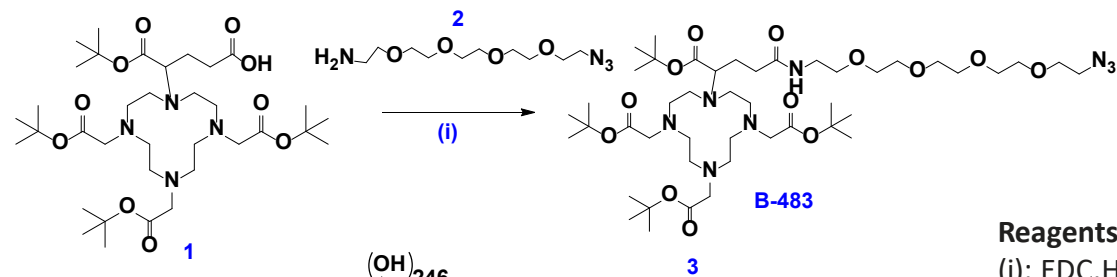
BRAIN METASTASES (Mouse Model)

Brain Metastases from IV Molt4-luc Cells
Single IV dose of HD-Cy5



HD (in red) crosses blood brain barrier and is taken up by reactive inflammatory cells (TAMs)

Synthesis of D6-B483



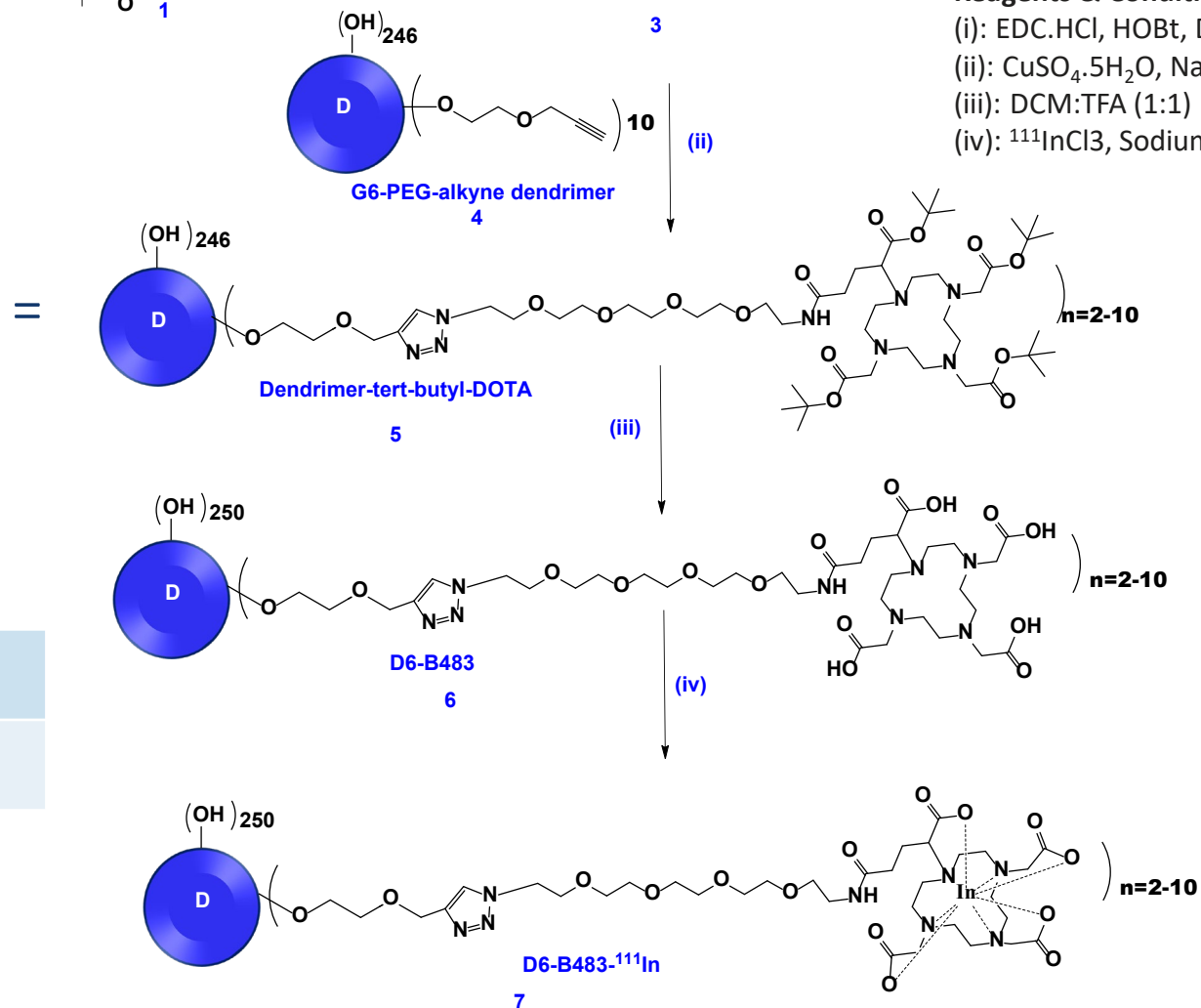
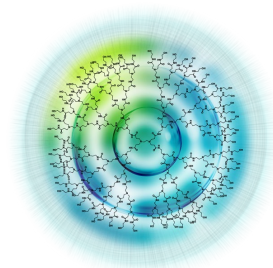
Reagents & Conditions:

(i): EDC.HCl, HOBT, DIPEA, DMF, RT, overnight

(ii): $\text{CuSO}_4 \cdot 5\text{H}_2\text{O}$, Na ascorbate, DMAc:H₂O, 8h

(iii): DCM:TFA (1:1)

(iv): $^{111}\text{InCl}_3$, Sodium acetate, pH5.5, 70°C

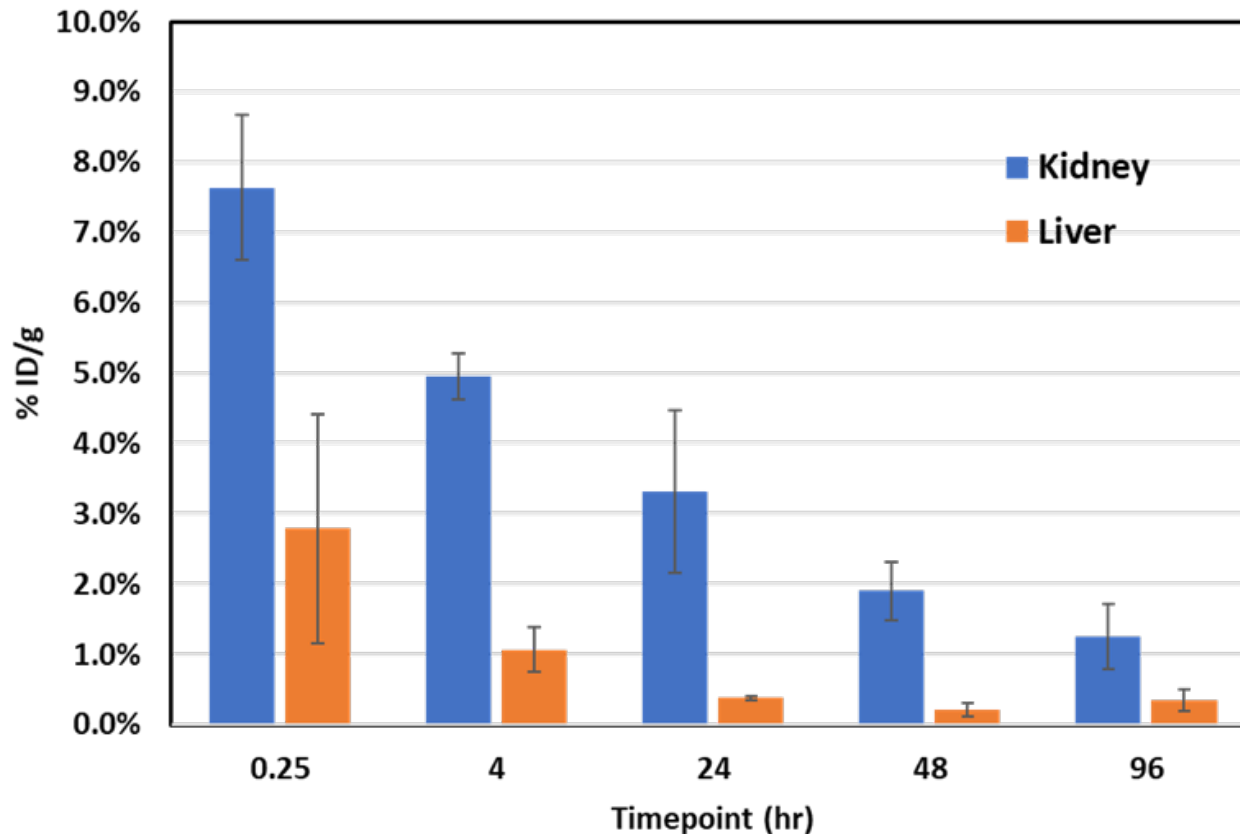


Labeling Efficiency	73%
Radiochemical purity	96%

Distribution of D6-B483

- Cy5 labelled D6-B483 with either 2-3 or 8-10 DOTA (10 mg/kg) was administered IV to mice.
- Mice (3/timepoint) were sacrificed at 15 min, 4, 24, 48, and 96 h post-dose.
- Amount of Cy5-D6-B483 was measured in kidney and liver after tissue homogenization and extraction.

Liaw 2020; Lesniak 2013

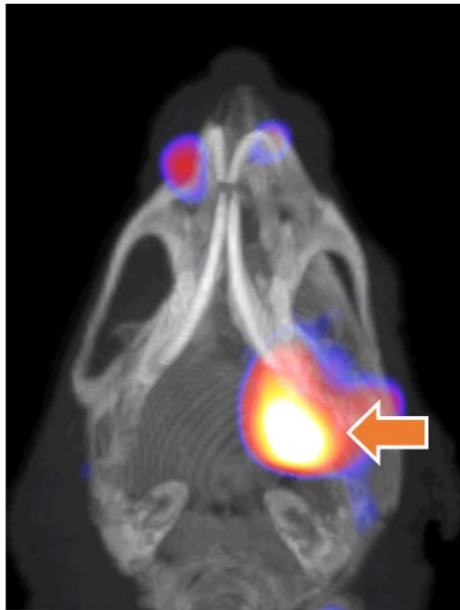


Rapid Renal Clearance

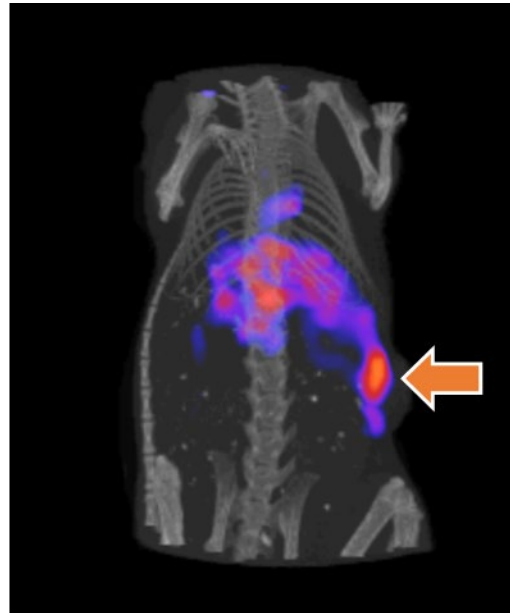
Evaluation of Selective Uptake In Brain and Solid Tumors

- 20 mice implanted with 10^6 GL-261-luc2 cells by stereotactic intracranial (IC) surgery
- Brain tumor size and location by bioluminescence (BLI) to confirm tumor sizes (MRI to BLI correlations previously established by Invicro)
- 8 mice implanted subcutaneous (SC) with 10^6 GL-261-luc2 cells; Dosed once tumors were between 125 to 350 mm³ (caliper measurements)
- IV dose of ¹¹¹In-D6-B483 (~230 μCi, 45 μg)
- SPECT/CT images: 3-6, 24, 48, 72 and 96 h post-dose

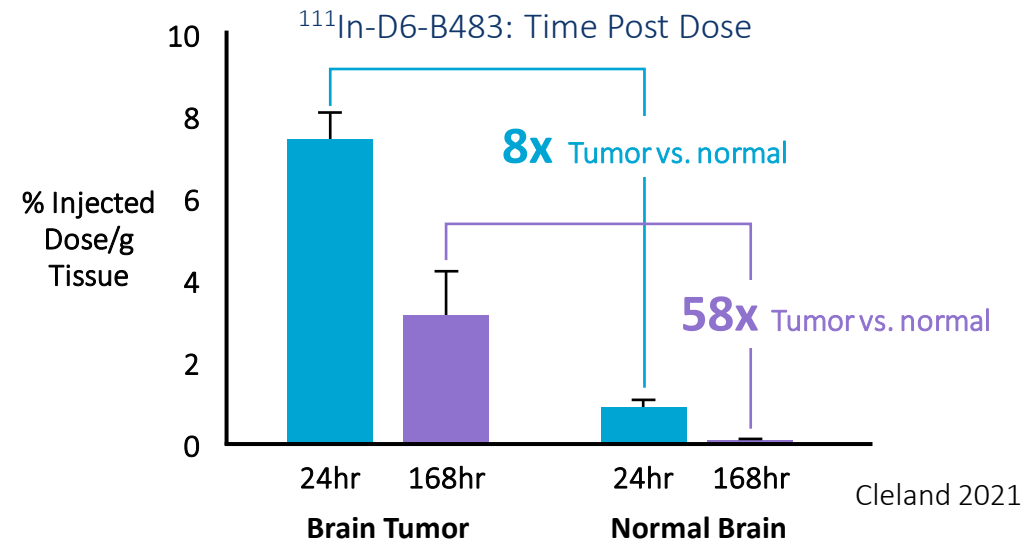
Intracranial (IC)



Subcutaneous (SC)



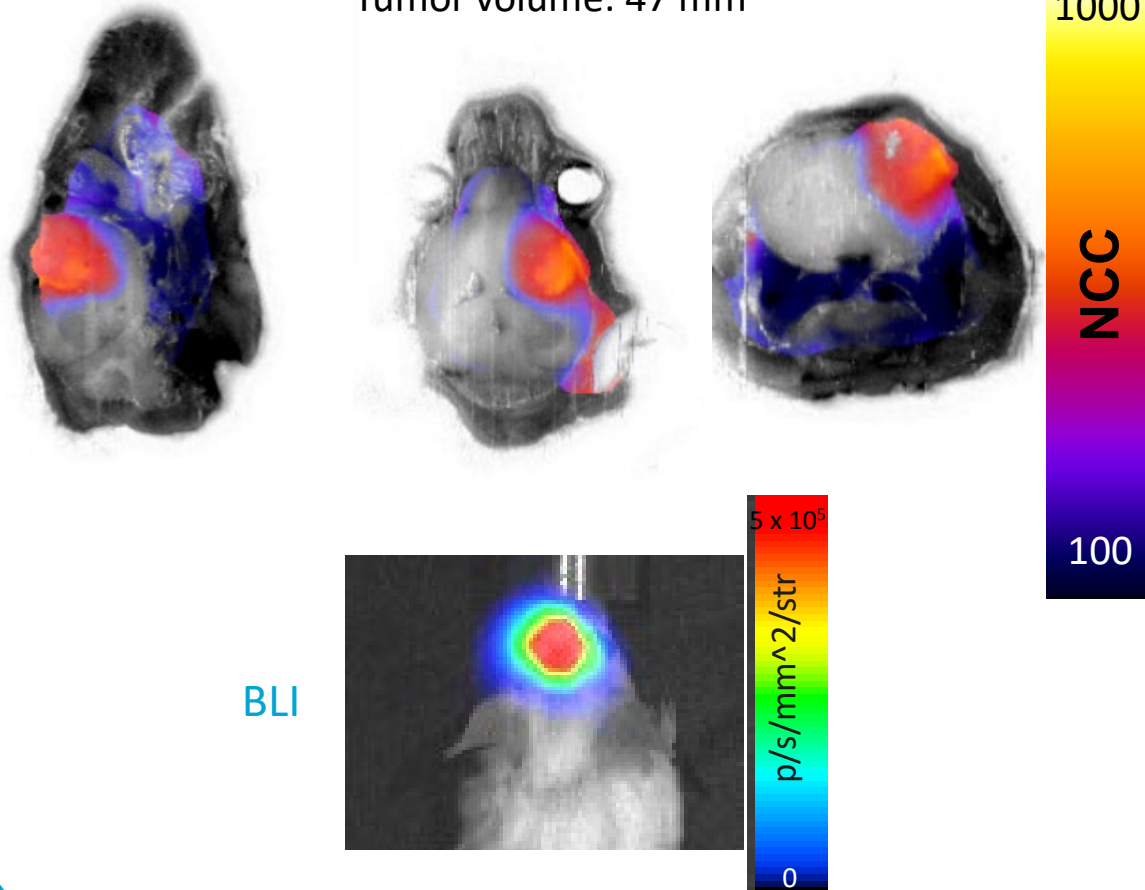
Previous Study Demonstrating Persistence



Localization of D6-B483 in Large Tumors

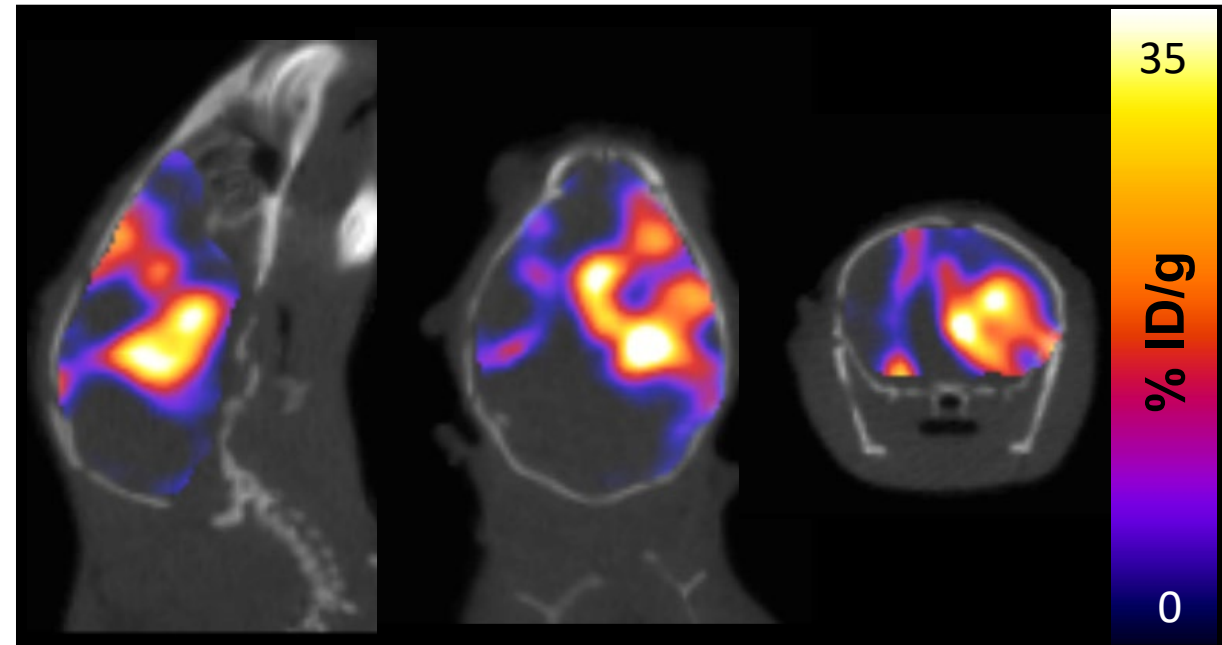
Cryo-fluorescence Tomography (CFT) Cy5-D6-B483

Subject 6, Hour 48
Tumor volume: 47 mm³



SPECT/CT

¹¹¹In-D6-B483
Subject 1, Hour 48
Tumor volume: 61 mm³

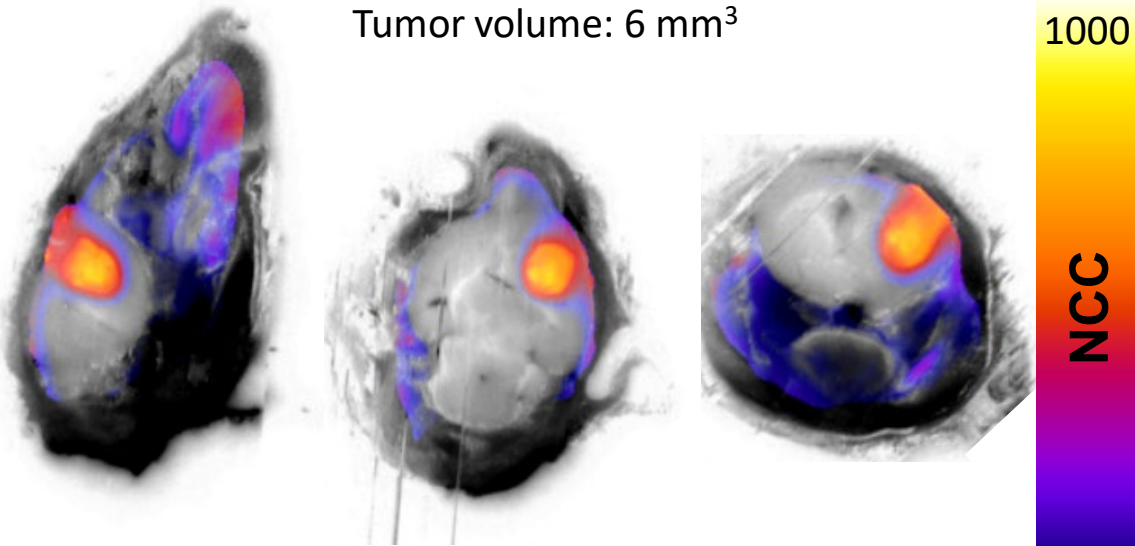


Tumor/Contralateral Ratio = 8

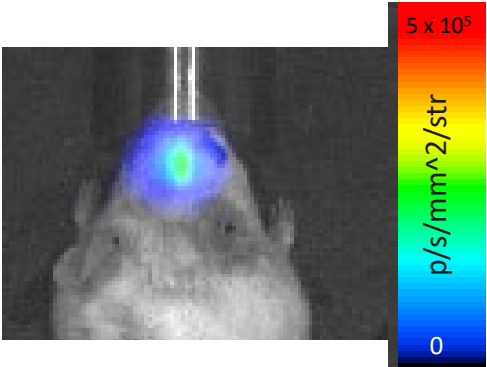
Localization of D6-B483 in Small Tumors

Cryo-fluorescence Tomography (CFT)
Cy5-D6-B483

Subject 18, Hour 48
Tumor volume: 6 mm³



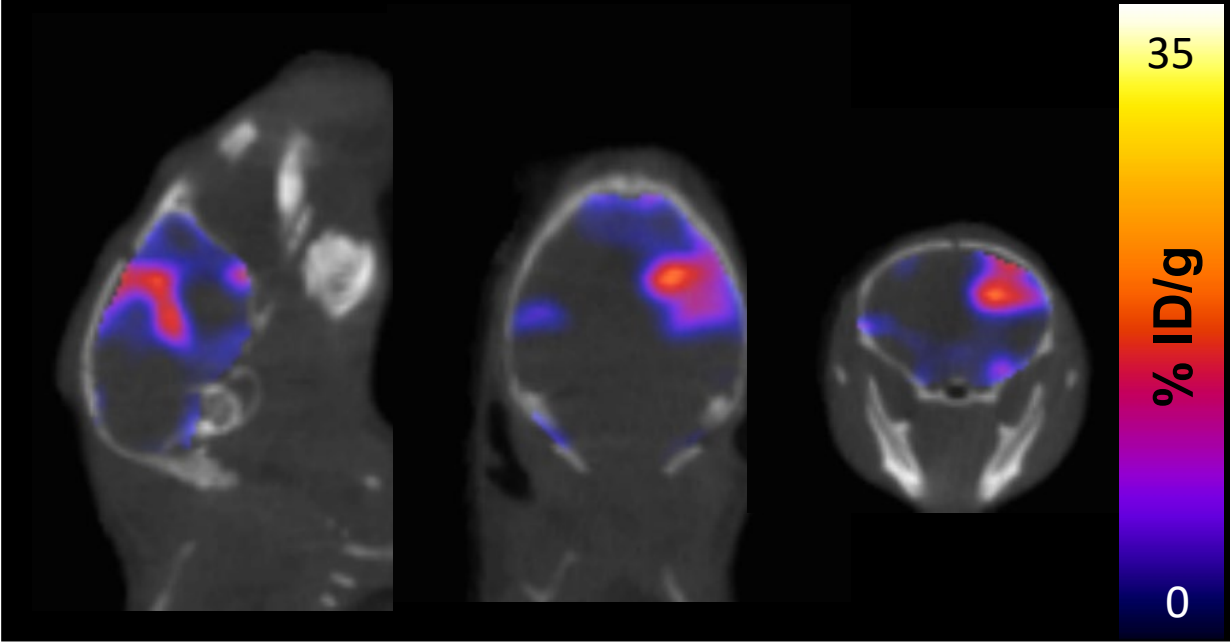
BLI



SPECT/CT

¹¹¹In-D6-B483

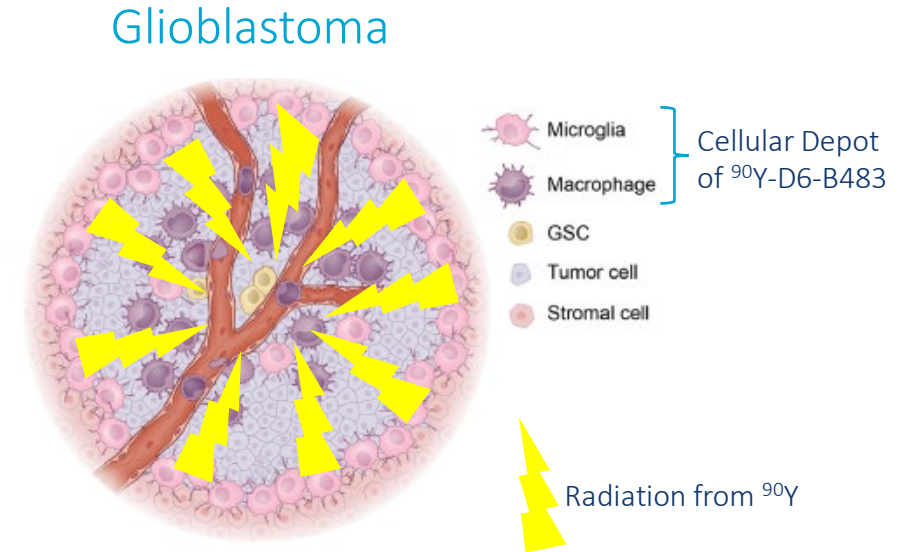
Subject 4, Hour 48
Tumor volume: 9 mm³



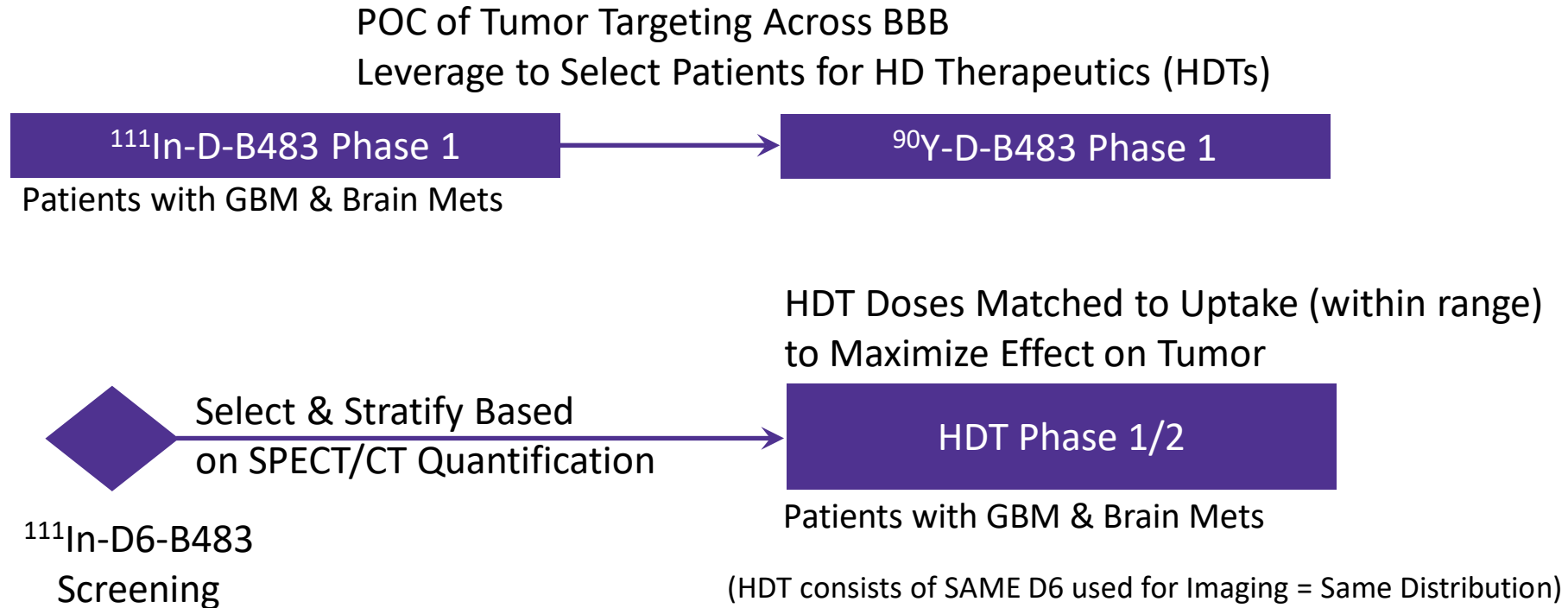
High Sensitivity to Detect Small Tumors

Radiotherapy Plan

- Choice of Radioisotope
 - Long pathlength to kill adjacent tumor cells
 - Long isotope half-life to avoid need for repeat dosing
 - Selected Isotope: ^{90}Y – 2.7 day half-life, 4-5 mm pathlength
- D6-B483 Persists in TAMs for up to 1 month
 - Local cellular depot of radiation
 - Minimize systemic exposure (cleared in 48 h)
- Planned Studies
 - Orthotopic GBM mouse model
 - Metastatic melanoma mouse model (^{111}In followed by ^{90}Y)



Overview of Clinical Strategy for Brain Cancer



Pre-IND for ¹¹¹In-D6-B483 Submitted to FDA – Feedback Expected by Nov 2021

Ability to Detect & Treat Brain Metastases