

IKS04: CA242-directed ADC for GI cancers

TARGET: CA242/ CanAg, a tumour-specific glycoform of MUC1 and relevant for GI tumours.

ANTIBODY: Anti-CanAg monoclonal, humanized IgG1

LINKER: Site-specific conjugation of β -glucuronide for tumour-selective enzymatic payload activation and release

DRUG/PAYLOAD: DNA cross-linker; a PBD prodrug (LCB20-0187)

DRUG DESCRIPTION: IKS04 incorporates an anti-CanAg antibody conjugated to highly potent DNA cross-linking payload (talirine-like potency) via site-specific conjugation, with tumour-selective payload activation and release: a 'PBD prodrug'. It is being developed as an 'ultra-low DAR' ADC, where the clinical design will entail infusion of naked anti-CanAg antibody ahead of an infusion of IKS04.

This is the only CanAg-directed ADC program in development and the first 'ultra-low DAR' fixed-dose ADC.

PRECLINICAL STUDIES: Preclinical studies have demonstrated best-in-class efficacy (MED in mouse xenografts) and safety (HNSTD NHPs), with a preclinical TI which is superior to all PBD-based ADCs in solid tumours.

In xenograft models for multiple GI cancers including CRC, GC and PDAC, and a wide range of expression levels, IKS04 induced complete regression with doses of 0.2 – 0.4 mg/kg.

Non-GLP toxicology studies in NHPs have confirmed a TI of >1.8, substantially higher than that seen in any other PBD-based ADC program for solid tumours. IKS04 offers a potentially effective and well-tolerated treatment option for notoriously difficult cancers.

DEVELOPMENT STATUS: Preclinical: IND enabling. IND planned for Q1 2025

CLINICAL INDICATION: GI Tumours:

- ▶ Colorectal cancers (CRC)
- ▶ Gastric cancer (GC)
- ▶ Pancreatic cancer (PDAC)
- ▶ Bladder cancer (BLCA)
- ▶ Uterine & endothelial cancers (EC, EAC)
- ▶ Lung cancer (NSCLC)

CLINICAL TRIALS: IND is planned for Q1 2025

Dialogue is ongoing between Iksuda and the FDA regarding the development pathway to IND and Phase 1 study design. Although a novel clinical regimen for an ADC, there is already precedence for the sequential administration of unconjugated antibody with the therapeutic conjugate for radiopharmaceuticals, (e.g. ¹³¹I-tositumomab, ²²⁵Ac-J591 and ¹⁷⁷Lu-lilotamab satetraxetan)

PARTNERING STATUS

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Contacts: Ian.Evetts@iksuda.com
David.Simpson@iksuda.com