

# Anti-Leukemic Activity of STRO-002, a Novel Folate Receptor-α (FR-α)-Targeting ADC in Relapsed/Refractory *CBFA2T3::GLIS2* AML

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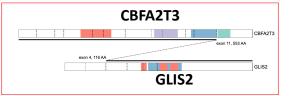


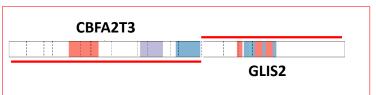
### **Disclosures**

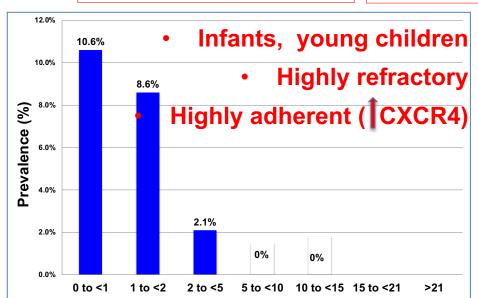
- Alex Butte and Kate Murray are employees of Sutro Biopharma
- Arturo Molina was an employee of Sutro Biopharma.
- Michael R. Loken, Laura Pardo and Lisa Brodersen are employees of Hematologics, Inc.
- Other authors No disclosures

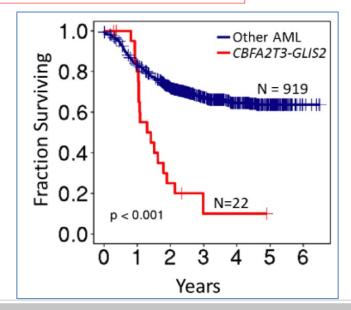
## CBFA2T3-GLIS2 (CBF/GLIS) AML

#### **Most refractory Childhood AML**



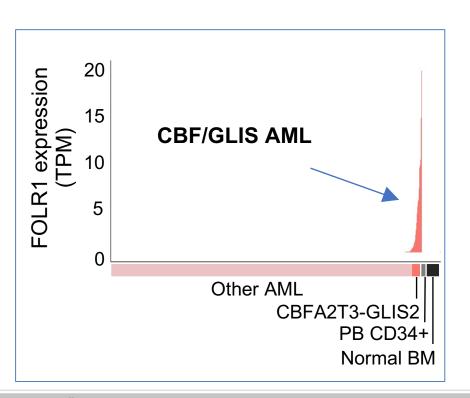


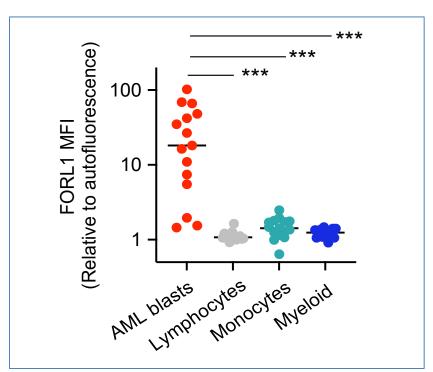




### FOLR1 uniquely expressed in CBF/GLIS AML

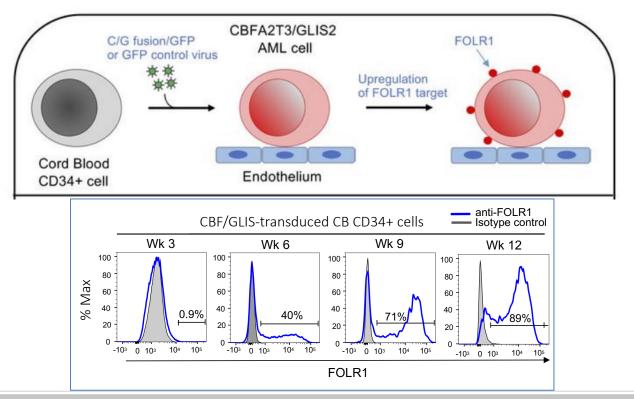
#### No expression in normal hematopoiesis



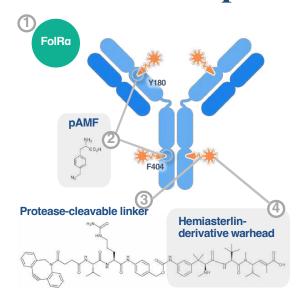


#### FOLR1 expression is induced by CBF/GLIS fusion

#### Causal Link between fusion and FOLR1 expression



# STRO-002 (Luveltamab Tazevibulin) is a FOLR1-directed ADC with promising clinical activity against FOLR1-positive ovarian cancer



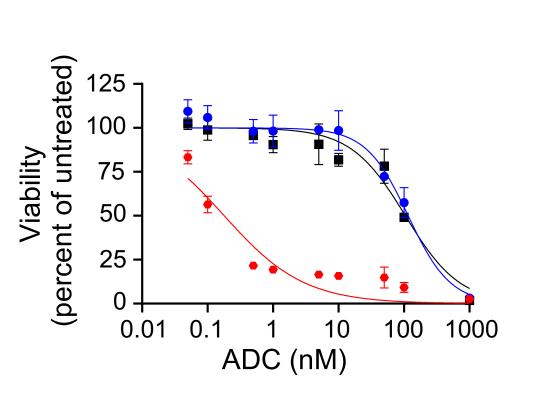
STRO-002 is a homogeneous antibody drug conjugate (ADC) with a drug-antibody ratio (DAR) of 4, targeting folate-receptor alpha (FolRo)

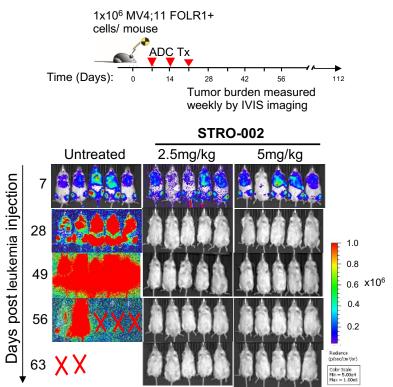
- FolRa is overexpressed in certain cancers including
  ovarian cancer and endometrial cancer
- Precisely positioned **non-natural amino acids**, p-azidomethyl-L-phenylalanine (pAMF), at positions Y180 and F404 on the heavy chain
- 3 Stable protease-cleavable linkers, with rapid clearance of toxic catabolite after release and cell killing
- Warhead is hemiasterlin-derivative¹ with potentially dual mechanism against the tumor tubulin-inhibitor cytotoxin, less sensitive to P-gp transport and induces immunogenic response upon cell death²

<sup>(1)</sup> Sutro-proprietary tubulin-targeting 3-aminophenol hemiasterlin warhead, SC209.

<sup>(2)</sup> Based on STRO-002 pre-clinical models showing immune stimulation at site of tumor upon cell death.

#### STRO-002; Potent FOLR1-directed Cytotoxicity





#### **STRO-002**

## CLINICAL EXPERIENCE IN CBF/GLIS AML

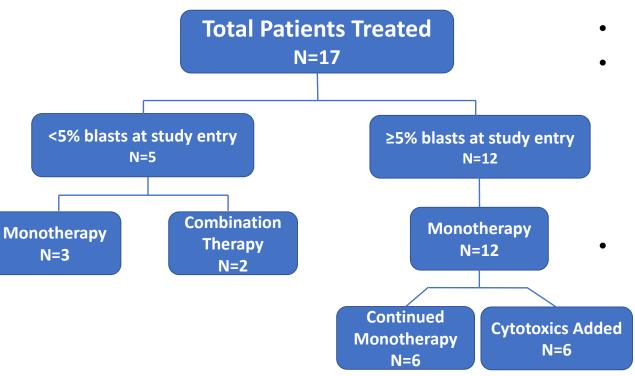
17 patients with CBF/GLIS+ AML treated with STRO-002 through SUTRO Compassionate Use Program

## **Patient Demographics**

	Number	%
Age at treatment		
<1	3	17%
1-2	10	60%
>2	4	23%
Median: 2		
Gender		
Male	7	41%
Female	10	59%
Race		
White	9	53%
Black / African American	5	29%
Asian	3	18%
Ethnicity		
Non-Hispanic	14	82%
Hispanic	2	12%
Not Reported	1	6%

	Number	%
Months from diagnosis to treatment		
<6 months	6	35%
6-12 months	5	29%
>12-24 months	5	29%
>24 months	1	6%
Number of prior therapies		
1-2	12	70%
3-4	3	18%
≥5	2	12%
Median: 2		
Disease status prior to STRO-002		
Prior transplant	8	47%
Primary refractory/relapsed AML	9	53%

## **Treatment Pathway**



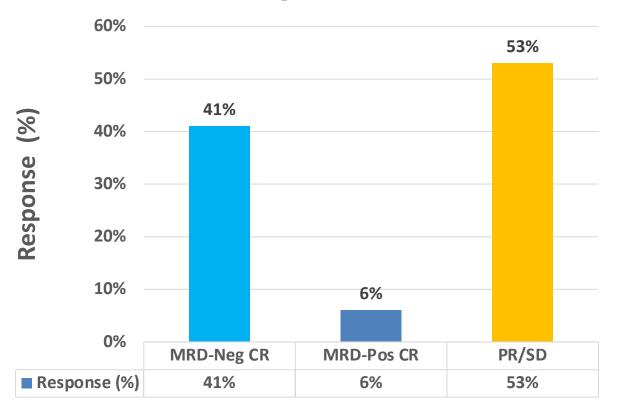
- Initial Monotherapy in 15
- Combination with
  - Methotrexate
  - Fludarabine & Cytarabine (+/- G-CSF)
  - Venetoclax +/- Azacitidine
  - Decitabine
- Consolidation with
  - DLI (donor lymphocyte infusions)
  - Stem cell transplant

## **Adverse Events**

Most common AEs, occurring in > 1 patient and considered possibly, probably or definitely related to STRO-002							
# of patients evaluated = 16	Grade 1	Grade 2	Grade 3	Grade 4	Total (%)		
Neutrophil count decreased	0	0	2	4	6 (40)		
Thyroid stimulating hormone increased	3	1	0	0	4 (26.7)		
Lymphocyte count decreased	0	0	2	1	3 (20)		
Platelet count decreased	0	0	2	1	3 (20)		
Anemia	0	0	2	0	2 (13.3)		
Febrile Neutropenia	0	0	2	0	2 (13.3)		
Vomiting	0	0	2	0	2 (13.3)		
White blood cell decreased	1	0	1	0	2 (13.3)		
Fever	1	1	0	0	2 (13.3)		
Aspartate aminotransferase increased	1	0	1	0	2 (13.3)		
Hypokalemia	1	0	0	1	2 (13.3)		

- Well tolerated
  - Monotherapy
  - Combination
- Outpatient monotherapy
- Maintenance monotherapy with little to no neutropenia

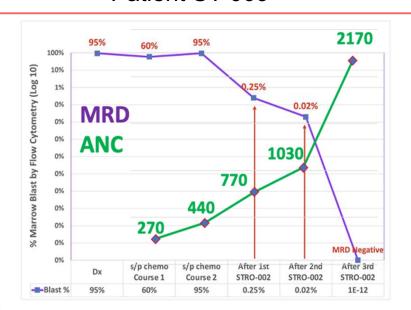
## **Best Overall Response to STRO-002**



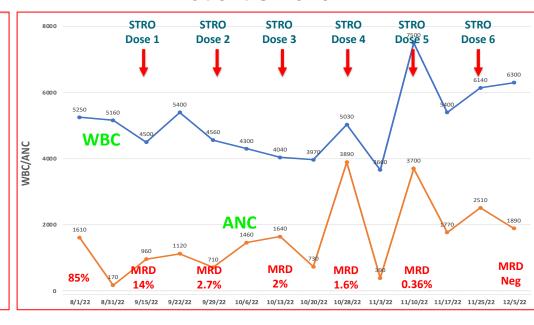
Response to STRO-002

## Deep Response with No Hematopoietic Toxicity

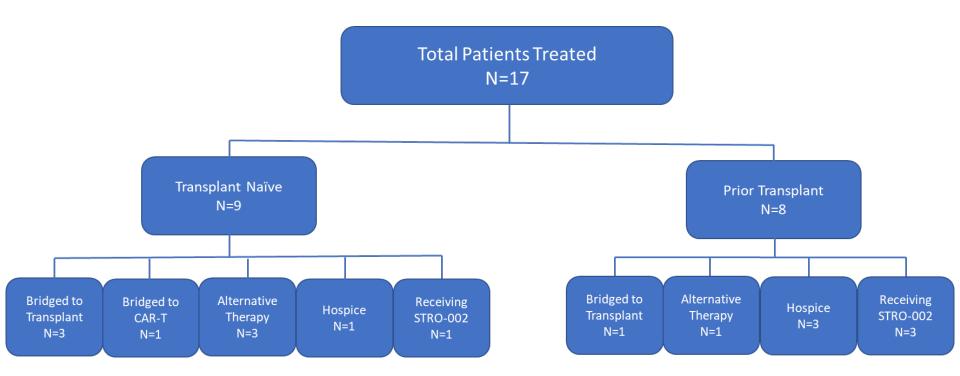
#### Patient ST-009



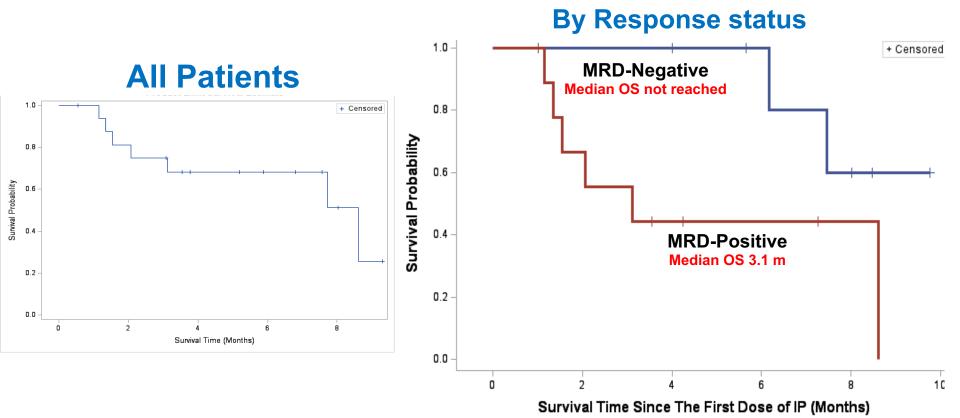
#### Patient ST-019



# **Patient Disposition**



## **Survival Post STRO-002 Treatment**



### **Conclusions**

- FOLR1 is expressed in CBF/GLIS AML
  - Causal association
  - No expression in normal hematopoiesis
- STRO-002 exhibits anti-leukemia activity in relapsed/refractory CBFA2T3-GLIS2 AML
- Well tolerated as monotherapy and in combination with cytotoxic therapy
- Responses were seen in patients with and without prior stem cell transplant
- Response (CR) associated with improved outcome

# **Acknowledgements**

#### **Collaborators:**

Lane Miller, MD, MSc Stephanie Massaro, MD, MPH Robin Williams, MD, MS Elizabeth Krieger, MD Melinda Pauly, MD Catherine Nelson, DO Deepa Bhojwani, MD Rebecca Johnson, MD Terzah M. Horton, MD. PhD Hamayun Imran, MD, MSc Wen-I Chang, MD Jennifer Welch, MD Philip Neff, MD Matthew Kutny, MD Raul C. Ribeiro, MD Felipe Bautista, MD Terri Guinipero, MD Amy Johnson MD Karen Lewing, MD

Alan Gamis MD

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