

BPM31510 Engagement of the Warburg Effect in GBM to Therapeutically Modulate Tumor Metabolism Through ROS Mediated Processes Preclinically and Clinically

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INTRODUCTION

Background
Warburg effect: Tumor metabolism is reprogrammed (↑ glycolysis, ↓ mitochondrial function) to protect the tumor against reactive oxygen species (ROS) mediated apoptosis. This shift promotes tumor growth and survival.

Therapeutic Concept
BPM31510 is a nanoparticle formulation of ubiquinone (CoQ10) for enhanced bioavailability. Designed to restore mitochondrial function and enhance oxidative stress in tumors. Currently evaluated in GBM (Phase 2 clinical trial, NCT04752813).

- Objectives**
- Identification of cancer types with potential susceptibility to BPM31510 (cancer types with high ROS pathway expression score)
 - Investigate BPM31510 efficacy and mechanism in a GBM preclinical model.
 - Investigate circulating biomarkers in glioma patients treated with BPM31510 for evidence of mechanistic engagement.

CANCER TYPES POTENTIALLY RESPONSIVE TO BPM31510 VIA ROS-LINKED APOPTOTIC SUSCEPTIBILITY

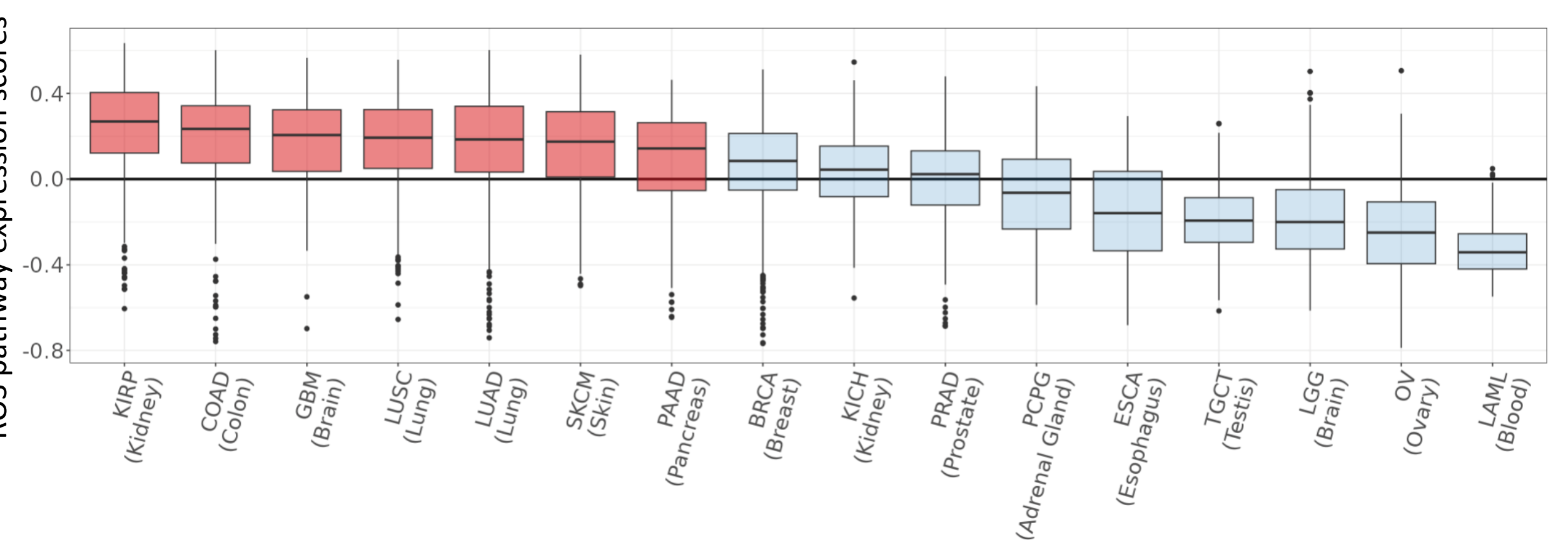


Figure 1: ROS pathway expression score for 16 TCGA cancer types. Cancer types with higher ROS pathway expression score (> 0.1) may be much more susceptible to apoptosis compared to those with lower ROS expression scores, since a lower amount of ubiquinone would be needed to induce apoptosis. Seven cancers (in red) stand to benefit from ubiquinone therapy – KIRP, COAD, GBM, LUSC, LUAD, SKCM, and PAAD.

BPM31510 EFFICACY IN C6 GLIOMA RAT MODEL

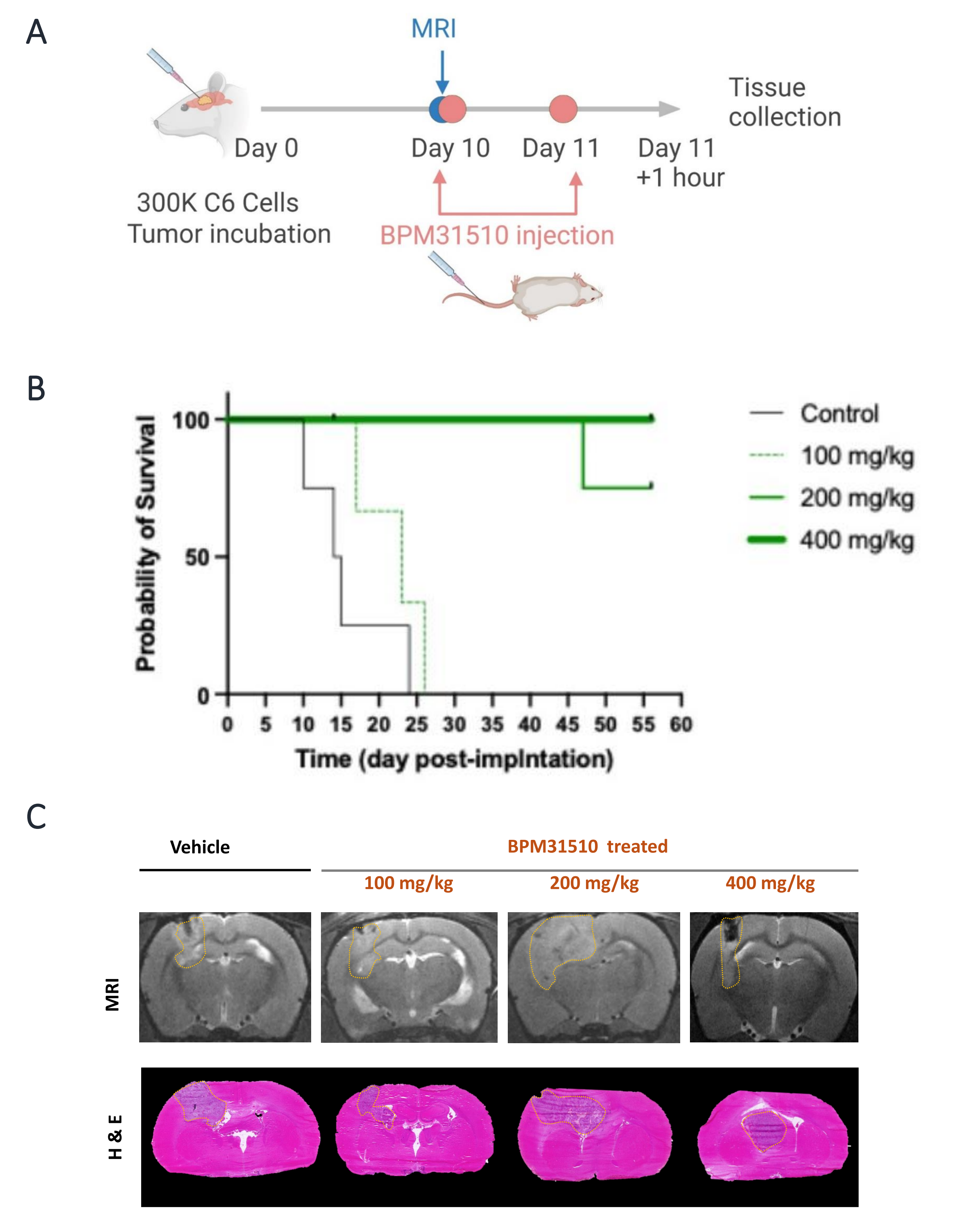


Figure 2: (A) Overview of experimental workflow. (B) Interim survival outcome of study. (C) MRI and histological assessment of GBM tumors treated with increasing doses of BPM31510.

TISSUE METABOLOMIC IMAGING ANALYSIS AFTER BPM31510 TREATMENT

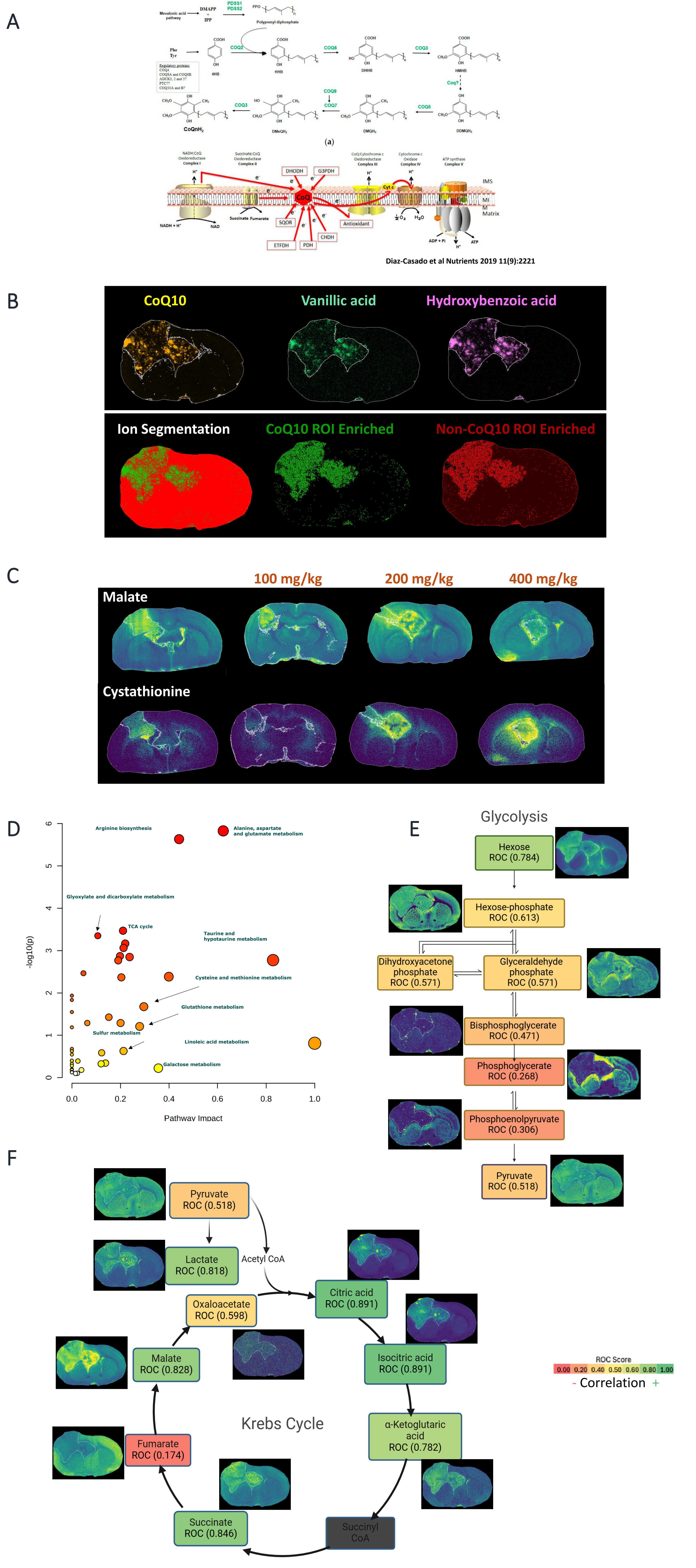


Figure 3: (A) Schematic of CoQ10 metabolism and its role in mitochondrial bioenergetics. (B) CoQ10, vanillic acid, and hydroxybenzoic acid mapping with CoQ10-enriched (green) and non-enriched (red) regions. (C) Dose effect on malate and cystathionine distribution after BPM31510 treatment. (D) Pathway impact analysis with significance (circle size) and impact (color intensity). (E-F) Glycolysis and Krebs cycle metabolites with tissue distribution and ROC scores showing correlation with CoQ10 (color gradient scale bottom).

BPM31510 INDUCES TUMOR METABOLIC REPROGRAMMING IN PATIENTS WITH HIGH-GRADE GLIOBLASTOMAS

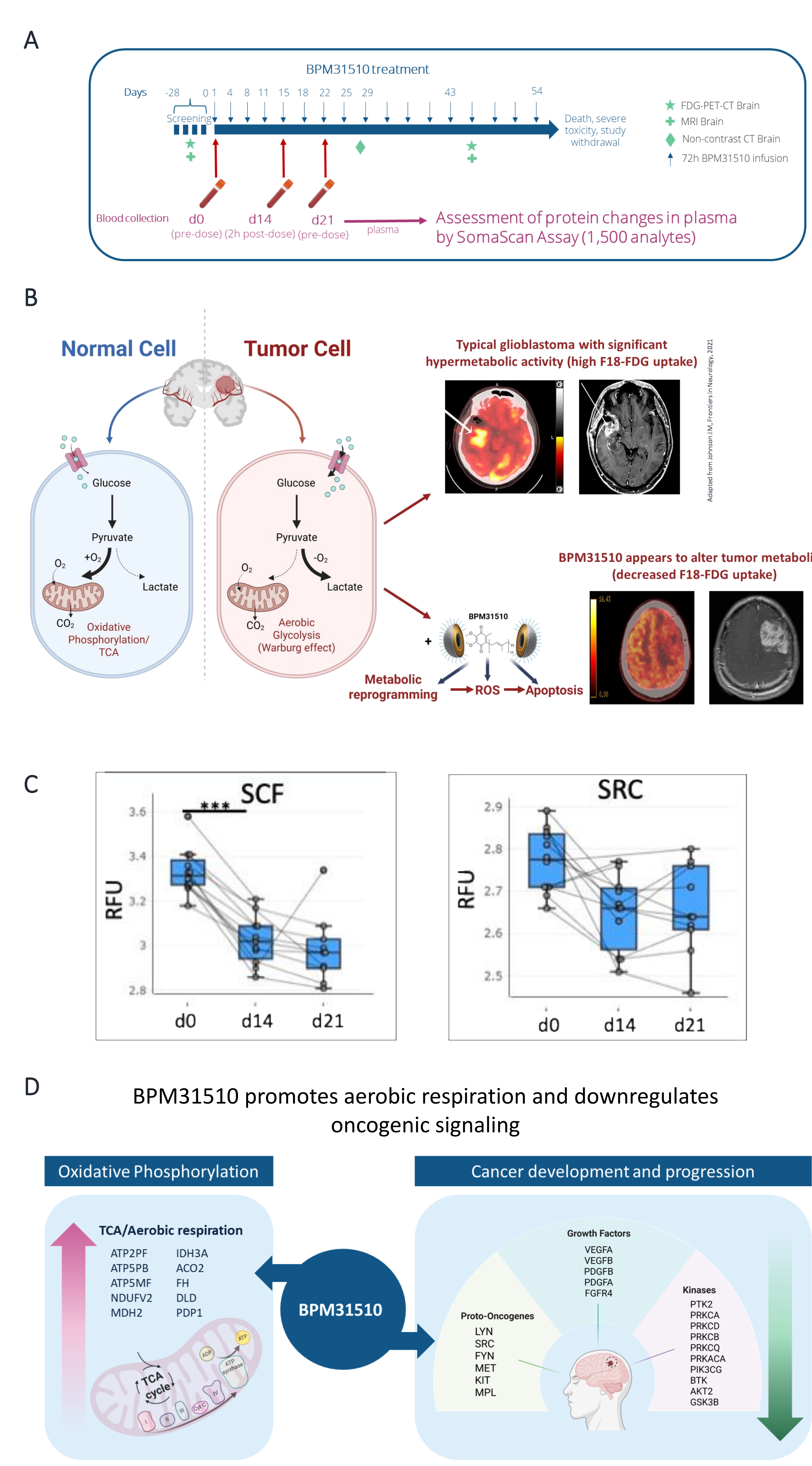


Figure 4: (A) Phase 1 study overview: BPM31510 plus vitamin K in subjects with glioblastoma (GB) that has recurred on a bevacizumab (BEV)-containing regimen were treated with BPM31510. Plasma from 12 patients in BPM31510V-06 (NCT03020602) was collected on days 0, 14 (2h post-dose), and 21 (pre-dose) and analyzed via SomaScan for 1,500 analytes. (B) Metabolic reprogramming in high-grade glioblastomas patients treated with BPM31510 as evidenced by 18F-FDG PET scans. (C) Reduced plasma levels of SCF (Stem Cell Factor) and SRC (SRC Proto-Oncogene, Non-Receptor Tyrosine Kinase) in patients treated with BPM31510. (D) Summary of BPM31510 impact on plasma biomarkers.

CONCLUSIONS

- Analysis of TCGA pathways highlighted GBM as a tumor type likely to benefit from BPM31510 treatment.
- BPM31510 efficacy in a preclinical GBM model and in patients with high-grade glioblastomas is associated with reengagement of mitochondrial function and increased redox state.