# **#408 PK/PD Biomarker Analysis to Assess Tumor-Specific Enrichment and Payload Delivery of ACTM-838, a Microbial-Based Immunotherapy**

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# ABSTRACT

## Background

Actvm

Therapeutics

ACTM-838 is a bacterial immunotherapy that encodes an engineered IL-15 (IL-15plex) and a constitutively active STING (eSTING). ACTM-838 is a highly modified, attenuated S. Typhimurium lacking several major inflammatory components on the microbial surface and designed to naturally and specifically enrich in the TME via auxotrophic dependency on metabolites of the adenosine pathway and purines to achieve tumor-specific payload delivery.

# Methods

ACTM-838 uptake, payload expression, and activity were measured using qPCR, MSD, and flow cytometry in human and mouse samples. TME immune responses and payload effects were assessed using single cell RNAseq, flow cytometry, and ELISA.

# Results

In EMT6 tumor-bearing mice, a single IV dose of ACTM-838 was able to rapidly distribute and enrich in the TME compared to other tissues and exhibited specific uptake in the phagocytic antigen-presenting cells such as monocytes, macrophages and neutrophils; whereas in liver, spleen and blood, neutrophils showed the highest uptake. This led to a significantly increased expression of human IL-15plex and murine IFN- $\alpha$  in the tumor compared to other tissues. Ex vivo bactofection of EMT6 tumors exhibited a dose-dependent increase in cellular uptake of ACTM-838, maintaining its preferential uptake in the myeloid compartment. ACTM-838 showed a significantly decreased inflammatory cytokine profile compared to parental strain VNP20009.

ACTM-838 showed significantly prolonged anti-tumor efficacy in EMT6 breast cancer, MC38 colon tumor, and MMTV-PyMT GEMM tumor models and exhibited significant reprogramming in the TME as well as periphery, with a decrease in exhausted T cells









and Treg and an increase in activated CD8 T cells and MHCII-high proliferating myeloid cells. In addition, a significant decrease in adenosine-generating enzyme CD73 across myeloid and T cell populations was observed, suggesting reduced immunosuppression. Human MDMs exhibited significantly reduced pro-inflammatory cytokines with high expression of co-stimulatory markers and MHCII with ACTM-838 compared to VNP20009.

ACTM-838 was stable in human whole blood with minimal complement activation. Serum from healthy donors and cancer patients showed varying levels of antisalmonella antibodies with minimal neutralization of ACTM-838. Indication prioritization analyses using the TCGA and MET500 datasets identified key indications with high myeloid content as well as adenosine and purine metabolism.

#### Conclusion

ACTM-838 is a novel immunotherapy delivering IL-15plex + eSTING payloads to phagocytic APCs, inducing a durable anti-tumor immune response after IV dosing. IVdelivered ACTM-838 possesses a compelling safety profile in mice and primates and is currently entering clinical trials in cancer patients in Australia.



Systemically delivered ACTM-838 is internalized by professional phagocytic cells of the TME, such as macrophages. Macrophages are induced to a M1-like and M2-like phenotype capable of phagocytosis of tumor cells, providing T cell engagement and costimulation, and expressing ACTM-838-encoded factors (eSTING/IL-15plex) to support anti-tumor immunity<sup>1,2</sup>.

![](_page_0_Figure_22.jpeg)

![](_page_0_Figure_23.jpeg)

CD3<sup>+</sup>

T Cells

Ly6G<sup>+</sup>

MHCII<sup>+</sup>

CD11b<sup>-</sup>

F4-80<sup>+</sup>

Neutrophils Macrophages Monocytes

ACTM-838 Tissue Uptake at MOI 50

Ly6C<sup>+</sup>

CD11c⁺

cDCs

![](_page_0_Figure_24.jpeg)

3.8x10<sup>7</sup> CFU of ACTM-838 was administered as a single IV dose once tumors reached 50-100mm<sup>3</sup>. Mice were euthanized at the labeled timepoints, tissues were collected. homogenized, and plated on LB agar plates for CFU counting tissues. Tissue lysates were analyzed by ELISA for the presence of IL-15plex and IFN $\alpha$ . ND = not detected; STST-501 = non-payload expressing strain.

# **EFFICACY & PAYLOAD DELIVERY IN SYNGENIC MOUSE MODELS** ACTM-838 Exhibits Durable Anti-Tumor Immunity in Syngeneic Tumor Models EMT6 Orthotopic Breast Cancer EMT6 Orthotopic Breast Cancer Dose Response Efficacy **Tumor Volumes at Endpoint**

![](_page_0_Figure_27.jpeg)

EMT6 breast cancer cells were implanted orthotopically in 6-8-week-old female BALB/c mice. A single IV dose of ACTM-838 administered when tumors reached 50-100 mm<sup>3</sup> volume induced a dose-dependent anti-tumor effect with increasing number of complete cures. Durable anti-tumor immunity was observed when rechallenged with fresh tumor cells in the contralateral mammary fat pad in cured animals after 30 days in remission. Similar results were observed in MC38 colon tumor syngeneic and MMTV-PyMT TNBC GEMM models<sup>1</sup>.

![](_page_0_Figure_29.jpeg)

![](_page_0_Figure_30.jpeg)

![](_page_0_Figure_31.jpeg)

![](_page_0_Figure_33.jpeg)

1x10<sup>5</sup> EMT6 tumor cells were implanted into the mammary fat pad of BALB/c mice. Once tumors reached 50-100mm<sup>3</sup>, 3x10<sup>7</sup> CFU of VNP20009, a control strain with deleted flagella (FLG-/-), STST-501 (ACTM-838 with no functional payload) or ACTM-838 was administered as a single dose. At D2 and D7 post IV dosing, serum was collected and tested for cytokines by MSD.

**VNP20009** 

### ACTM-838 Induces Significantly Lower Inflammatory Cytokines than VNP20009 in Human MDMs

![](_page_0_Figure_36.jpeg)

**Functional Cytokines** 

![](_page_0_Figure_38.jpeg)

![](_page_0_Figure_39.jpeg)

Human monocytes were differentiated into M0, M1 and M2 macrophages using various stimuli. MDMs were bactofected for 1 hour with MOI 40 of ACTM-838 or VNP20009 and treated with gentamycin to remove extracellular bacteria. Cytokines were measured in the media supernatant by MSD at 48 hours post-bactofection. Data shown is M0 macrophages. Similar trends were observed in M2 macrophages.

> ACTM-838 is Stable in Whole Blood with Significantly Reduced **Complement Activation Compared to VNP20009**

![](_page_0_Figure_42.jpeg)

![](_page_0_Figure_43.jpeg)

TCGA Tumor RNAseq dataset was used to assess expression of published adenosine and myeloid signatures using pathway Z-scores. Each patient was ranked based on the expression of these scores and patients above 25<sup>th</sup> percentile of expression were deemed as positive for a given pathway expression. Patients with expression of both adenosine and myeloid pathways above the 25th percentile were assessed for prevalence in a given tumor indication.

![](_page_0_Figure_45.jpeg)

Tissues	% Decrease in ACTM-1950 Colonization with Ciprofloxacin
Whole Blood	98
Spleen	97
Liver	80

Naïve Balb/c mice were administered ACTM-1950 (ACTM-838 surrogate with kanamycin resistance cassette) IV with 3e7 CFU/animal. Ciprofloxacin was dosed 2x daily at 2 mg/mouse for 14 days. Tissues were collected fresh, weighed, processed into tissue homogenates, and plated onto LB agar overnight for CFU counts.

# SUMMARY

- ACTM-838 demonstrates •
  - Durable anti-tumor efficacy
  - Tumor specific enrichment and persistence
  - Tumor specific payload delivery
- Cell type specificity restricted to professional APCs
  - Ability to activate the immunosuppressive TME
- Genomic and plasmid stability in vivo
- ACTM-838 safety
  - Surface coat modifications broadly reduce systemic inflammation and enable safe IV delivery
  - Remains sensitive to frontline antibiotics
- ADA shows minimal impact on stability
- GLP and non-GLP toxicology in primates •

EMT6 tumor cells were implanted into 6-8 week old BALB/c mice. 6x10<sup>7</sup> CFU of ACTM-838 was administered as a single IV dose. Mice were euthanized at day 1 post dosing, organs were harvested, dissociated, and analyzed by flow cytometry for cell surface markers and intracellular ACTM-838.

ACTM-838 Significantly Decreases Lung Metastasis, Exhibits Tumor-Specific Payload Expression and Reduces Adenosine Mediated Immunosuppression in the TME

![](_page_0_Figure_65.jpeg)

1x10<sup>5</sup> EMT6-M tumor cells were intravenously injected into BALB/c mice. 6x10<sup>7</sup> CFU of ACTM-838 was administered as a single dose 3 days post tumor implantation. Mice were euthanized on day 11 and tissues were analyzed for the presence of lung metastases, soluble IL-15plex and CD73 expression. Similar results were observed in MC38 and MMTV-PyMT GEMM tumor models<sup>1</sup>

Ki67<sup>hi</sup>MHCII<sup>+</sup> Ki67<sup>hi</sup>MHCII

![](_page_0_Figure_68.jpeg)

S.

EMT6 breast cancer cells were implanted orthotopically in 6-8week old female BALB/c mice. A single IV dose of ACTM-838 administered when tumors reached 50-100 mm<sup>3</sup> volume. CD45<sup>+</sup> cell populations were assessed by flow cytometry on D0, D4, D7 and D10 post-treatment in blood. MMTV-PyMT GEMM mice with a minimum of 1-2 palpable spontaneous tumors (~7-8 weeks after birth) were treated with 6e7 CFU of ACTM-838. CD45<sup>+</sup> cell populations were assessed by flow cytometry on D7 post-ACTM-838.

# PBS ACTM-838 VNP20009

Human whole blood from healthy donors was incubated at 37 degrees with either PBS, ACTM-838 or VNP20009 for the indicated timepoints. At each timepoint, 100ul of blood was assessed for complement activation by ELISA or plated on LB agar plates for CFU counting.

ACTM-838 is Stable in Presence of Pre-Existing Anti-Salmonella Antibodies in Human Serum

> % Total Bacteria Bound by Anti-Salmonella Abs in Serum

![](_page_0_Figure_74.jpeg)

![](_page_0_Figure_75.jpeg)

#### ACTM-838 VNP-20009

Human serum from healthy donors and cancer patients was incubated with live-dead dye labeled ACTM-838 for 30 minutes. ACTM-838 binding to pre-existing serum antsalmonella IgG was assessed by flow cytometry using anti-human secondary IgG antibody. Anti-salmonella antibodies in human serum bind VNP-20009 more efficiently than ACTM-838. Minimal impact on ACTM-838 viability was observed by pre-existing anti-salmonella loG.

•	Safety observed at all dose levels tested (1x10 <sup>8</sup> - 3x10 <sup>9</sup>
	CFU/monkey)

- Transient reversible increase in serum cytokines
- No adverse findings reported in body weight, hematology, coagulation, and clinical chemistry
- No shedding detected in urine or feces
- ACTM-838 is entering Ph1 clinical trials in solid tumors in Q1 2024

	VNP20009 (Parental Strain)	ACTM-838		
Safety	<ul> <li>Genome engineered via msbB for altering LPS acylation<sup>3</sup></li> <li>DLT due to high levels of cytokines and persistent bacteremia in Ph1</li> </ul>	<ul> <li>Genome engineering to dampen pro- inflammatory effects: Curli fimbriae, flagella, asparaginase activity, LPS acylation, removal of biofilms.</li> <li>Systemic cytokines significantly reduced in mice, 3e9 CFU well tolerated in NHP GLP tox studies</li> </ul>		
Tumor Targeting	<ul> <li>Purine auxotrophy enables tumor targeting in mice</li> <li>Not detected in patient samples until MTD<sup>3</sup></li> </ul>	Purine + adenosine auxotrophy for tumor specific enrichment and sustained colonization after single IV dose		
Cell Type Specificity	<ul> <li>Internalized in epithelial, endothelial and myeloid populations due to flagella<sup>2</sup></li> </ul>	<ul> <li>Internalized only via active phagocytosis by antigen presenting cells in TME</li> </ul>		
Payload Delivery	No payloads	<ul> <li>DNA plasmid delivers 2 engineered payloads – IL-15plex and eSTING to the TME</li> <li>Multiple plasmid copies per bacterial cell allows for efficient payload delivery at lower doses of bacterial vehicle</li> </ul>		
Efficacy	<ul> <li>No cures were observed in any mouse models, only improvements in survival<sup>4</sup>.</li> <li>Prolonged survival in lung metastasis B16 model<sup>4</sup></li> <li>No efficacy observed in melanoma Ph1 trial<sup>3</sup></li> </ul>	<ul> <li>Consistently shows increasing cure rates with durable anti-tumor immunity upon tumor rechallenge in multiple models and significant efficacy in GEMM model</li> <li>Delayed tumor progression in GEMM, reduced lung metastasis in GEMM and EMT6 metastasis models</li> </ul>		
TME Re- activation	<ul> <li>Neutrophil infiltration and tumor necrosis observed in mice<sup>4</sup></li> <li>Biofilm formation leads to immunosuppressive TME</li> </ul>	<ul> <li>Comprehensive tumor re-activation with increased infiltration of T/B/NK cells, activation of effector CD8 T cells, reduction in Treg and Tex, activation and antigen presentation of monocytes and macrophages</li> <li>Peripheral activation of antigen-specific T cells and myeloid cells</li> </ul>		
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