EXTH-104 Role of ClpP and Mitochondrial Metabolism in the Anti-cancer Effects of Imipridone ONC201 and ONC206 in Glioblastoma and DIPG

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Introduction

- ONC201, a first-in-class imipridone, is an oral, blood-brain barrier penetrating, selective small molecule antagonist of dopamine receptor D2 (DRD2) and agonist of the mitochondrial protease caseinolytic mitochondrial matrix peptidase proteolytic subunit (ClpP) (Figure 1).¹⁻⁵
- ONC201 has demonstrated tolerability and durable tumor regressions in H3 K27M glioma patients.⁶

Figure 1. ONC201 Mechanism of Action





Results

Figure 5. Positions of ClpP Mutations Identified in GBM and DIPG ONC201/206 **Resistant Cells Relative to ONC201 Binding Site (derived from NCBI Molecular** Modeling Database (MMDB) ID: 175107)



AKT, protein kinase B; ATF4, activating transcription factor 4; CHOP, C/EBP-homologous protein; ClpP, caseinolytic protease P; DRD2, dopamine receptor D2; ERK, extracellular-regulated kinase. Originally published in Anderson, et al. Clin Cancer Res. 2022;28:1773–82.

- ONC206, a chemical derivative of ONC201, is the second imipridone to be developed and is currently in Phase 1 clinical development.⁷
- Relative to ONC201, ONC206 has demonstrated differentiated DRD2 receptor pharmacology⁸, improved potency, enhanced absorption/tissue distribution, and preclinical anti-cancer activity in *vitro* and *in vivo*.⁹⁻¹²

Methods

Cell Lines

- Glioblastoma (GBM; T98G, A172, U-87MG) and astrocytoma (H4, U-118MG) lines were obtained from American Type Culture Collection (ATCC).
- H3.3 K27M mutant diffuse intrinsic pontine glioma cell lines (DIPG; SF8628, SF7761) were acquired from Millipore.
- **Cell Viability** Cells (1000-5000) were seeded in a 96-well plate containing compound dilutions in the appropriate range. Cell viability was determined using CellTiter-Glo (Promega) at day five unless specified. CRISPR



Cell viability results for ONC201 and ONC206 at indicated concentrations/timepoints in glioblastoma (A, A172; B, U-87MG), astrocytoma (C, H4; D, U-118MG) and H3.3 K27M-mutant DIPG (E, SF8628; **F**, SF7761) lines at day 5 (n=4). Red indicated ONC206, black indicates ONC201.



• ONC201 and ONC206-resistant T98G GBM clones (3-fold above initial IC50)

- ONC201 resistant cells had ClpP A131D/R226G mutations (~32-38% prevalence)
- ONC206 resistant cells had a ClpP R226G mutation (~43-54% prevalence)

ONC201-resistant SF8628 DIPG K27M clones

- ONC201 (16 μM) resistant cells (A16) had a ClpP I193V mutation (~50-67% prevalence)
- ONC201 (2 μM) resistant cells (C2) had a ClpP N172Y mutation (~22-33% prevalence)

Figure 6. RNAseq Analysis in T98G Parental Versus ONC201-resistant Cells



- (Dharmacon, Horizon) • Edit-R sgRNA Lentiviral vector used to All-in-one was generate ClpP knockout cell lines.
- The lentiviral vector contains sgRNA that targets the ClpP gene in exon 1 or exon 4, a human Cas9 codon, and a puromycin resistance marker.
- sgRNA sequences are as follows:
 - ClpP gene in exon 1: ATGTGGCCCGGAATATTGGT
 - ClpP gene in exon 4: AGGGCTGGTGATCATGATA

Transduction

• SF8628 cell lines were transduced with lentiviral particles with a multiplicity of infection (MOI) of 0.03 or 0.3 for 2 days, then selected with puromycin (1 μ M) for 14 days and harvested for further protein detection and analysis.

Resistant Clones

- Treatment to generate acquired resistance was initiated at approximately 0.2 to 1 times the IC50 and drug concentration was doubled when cells were able to proliferate in a given concentration.
- Acquired resistance was defined as cell proliferation in the presence of drug as determined by CellTiter-Glo.
- Time-stability of acquired resistance was confirmed by growing cells in the absence of drug for 2 to 4 weeks and retesting.
- Two polyclonal resistant lines were generated for each compound.
- Whole Genome/Exome Sequencing
- DNA was purified with QIAamp DNA Blood Midi from approximately 5 million cells.
- After DNA purification, samples were divided into replicates for sequencing at Novogene. **RNAseq analysis**
- RNA extraction, library prep, and sequencing using NEBNext library prep and Illumina sequencing (1x75bp reads, avg 15M reads) on extracted RNA from T98G glioblastoma cells (parental, ONC201 resistant, ONC206 resistant) was performed in triplicate for indicated treatments (vehicle, ONC201 IC50, ONC206 IC50) and timepoints (4hr, 24hr, 48hr continuous, 24hr-treat/24hr-washout).



MOI: 0.3 MOI: 0.03





RNAseq analysis revealed upregulation (101 genes) of the integrated stress response and amino acid metabolism with ONC201 (IC50) treatment (48h) in T98G parental cells but not ONC201-resistant cells (ONC201R). Each circle represents a comparison. When area proportion is set, the size of the circle is proportional to the number of genes or features that are differentially expressed at a given p-value cutoff. Overlap is proportional to the number of shared genes between those two comparisons.

Figure 7. Glioma Cells are More Sensitive to ONC201 with Lower Glucose **Concentrations in the Media**



Cell viability results (Day 3) for ONC201 at indicated concentrations in U-118MG (A) and SF8628 (B) cells with varying glucose levels in the media (n=2).

Summary

Results

Table 1. IC50 for ONC201 and ONC206 in GBM, DIPG, and Astrocytoma Lines (Day 5)

Cell line	Classification	ΟΝC201 ΙC50 (μΜ)	ONC206 IC50 (μM)
A172	Glioblastoma	1.751	0.223
U-87 MG	Glioblastoma	1.237	0.140
T98G	Glioblastoma	1.807	0.225
H4	Astrocytoma	0.851	0.180
U-118 MG	Astrocytoma	1.821	0.218
SF8628	H3.3 K27M-mutant DIPG	1.398	0.201
SF7761	H3.3 K27M-mutant DIPG	1.172	0.135



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Cell viability results (Day 5) for ONC201 and ONC206 in SF8628 and T98G parental and resistant cells. SF8628-A16 and SF8628-C2 = cells selected under 16 or 2 μ M ONC201. SF8628-A16 ND = A16 cells without ONC201 treatment for 25 days. T98G-201R and T98G-206R = cells selected under 16 μ M ONC201 or 1.6 μM ONC206.

- Effects on ClpP and mitochondrial metabolism are key aspects for the mechanism of action of ONC201 and ONC206 in vitro.
- ClpP could also play a role in the evolution of glioma cell resistance upon prolonged exposure to ONC201 or ONC206.
- ONC206 exhibits improved nanomolar potency relative to ONC201 in GBM, DIPG, and astrocytoma cells.
- Studies on the role of DRD2, suggested by prior published work, are ongoing.

References

ClpP

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Disclosures

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