A Phase 1 Study of RX-5902 (Supinoxin) an Oral Agent Targeting Phosphorylated p68 to Treat Subjects with Advanced Solid Tumors.

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Abstract TPS#2608

Background: RX-5902 is a novel compound that targets phosphorylated p68 RNA helicase (also known as DDX5), a member of the DEAD box family of RNA helicases. Phosphorylated p68 may play a vital role in cell proliferation and tumor/cancer progression. As a single agent, RX-5902 inhibits tumor growth and enhances survival in a variety of in vivo animal xenograft tumor models (e.g., renal, ovarian, pancreatic, melanoma).

Methods: This Phase 1, open-label, multicenter study evaluates the efficacy and safety of RX-5902 in subjects with solid tumors. RX-5902 is administered orally once weekly for 3 weeks with 1 week of rest in each 4 week cycle. Dose escalation starts with an accelerated design treating 1 subject per dose followed by a standard 3 + 3 design using a modified Fibonacci sequence after the occurrence of a single Grade 2 or greater adverse event that is considered at least possibly related to RX-5902.

The primary endpoint is the overall safety profile characterized by the type, frequency, severity, timing of onset, duration and relationship to study therapy of any adverse events, or abnormalities of laboratory tests or electrocardiograms as well as the description of any dose limiting toxicities that occur during Cycle 1, serious adverse events, or adverse events leading to discontinuation of study treatment. Secondary endpoints include pharmacokinetic parameters and Indices of anti-tumor activity. Exploratory endpoints are biochemical levels of drug targets in blood and tumor samples. Eligible subjects must have confirmed histologic or cytologic evidence of metastatic or locally advanced solid neoplasm that has failed to respond to standard therapy, progressed despite standard therapy or for which standard therapy does not exist. There is no limit on the number of prior treatment regimens. NCT020030928

Proposed Mechanism of Action

Cancer Cell

Pancreatic Cancer Model of Anti-tumor Activity

Methylation

Phosphorylated p68

Myc, c-myc, c-jun

Melanoma Model of Anti-tumor Activity

Key Exclusion Criteria

- Primary brain tumor or active brain metastases
- Persistent toxicities >Grade 1 (except Grade 2 alopecia or neuropathy) associated with previous cancer therapies
- Any other cancer treatment within 2 weeks of planned study treatment
- History of clinically significant GI bleed, intestinal obstruction, or GI perforation within 6 months of study dosing
- History of long QT syndrome or clinically significant cardiac arrhythmias (except stable atrial fibrillation)
- Myocardial infarction within 6 months of study dosing
- Active infection requiring IV antibiotics within 2 weeks of dosing
- History of Hepatitis B, C, or HIV
- Use of potent inhibitor or inducer of CYP3A4/5 within 14 days of planned study treatment or expected requirement for use of such a drug during study
- Use of a potent inhibitor or inducer of drug transporters or conjugating enzymes within 14 days prior to planned study treatment or expected requirement for use of such a drug during study

References

- Lee et al, AACR; Cancer Res 2011;71(8 Suppl):Abstract nr 1371

Study Objectives

Primary objectives:
- Evaluate safety and tolerability of escalating doses of RX-5902 in subjects

Secondary objectives:
- Characterize the safety and tolerability of multiple doses of RX-5902
- Characterize the PK profile of RX-5902
- Characterize the antitumor activity of RX-5902

Exploratory objective:
- Investigate the effect of RX-5902 on potential biomarkers (e.g., P68, c-myc, c-jun) in blood or tumor samples

Key Inclusion Criteria

- Male and female patients who are 18 yrs or older
- Histologically confirmed solid tumor malignancy that is refractory, intolerant, or ineligible to receive approved standard therapy
- Measurable or evaluable disease per Response Evaluation Criteria in Solid Tumors (RECIST)
- Able to swallow capsules

Investigator Disclosures

For further information about RX-5902 and Rexahn Pharmaceuticals, Inc., please contact Dr. Christine Peterson: peterscn@rexahn.com, (240) 286-5300 x 320