22nd INTERNATIONAL ULTMANN CHICAGO LYMPHOMA SYMPOSIUM

APRIL 4 - 5, 2025

WESTIN CHICAGO RIVER NORTH # I U C L S 2 0 2 5

Kaitlin Kelly, PharmD, BCOP April 4, 2025 Novel Therapies in Lymphoma

This activity is jointly provided by:



Disclosure

- No relevant conflicts of interest to disclose
- Novel therapies without off-label or FDA approval will be discussed throughout the presentation

Objectives

- 1. Review the history of recent drug therapy approvals in lymphoma
- 2. Evaluate the mechanism and safety profiles of novel therapies in the pipeline
 - Cereblon E3 Ligase Modulator (CELMoDs)
 - Bruton Tyrosine Kinase (BTK) Degraders

Non-Hodgkin Lymphoma Treatment Approval Timeline





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Novel Therapies in the Pipeline

IMiDs vs.CELMoDs



Immunomodulatory Agents (IMiDs) Mechanism of Action

Direct Antitumor Effects

GO/G1 cell cycle arrest

Decrease Proliferation

- Upregulation of cyclin-dependent kinase inhibitor p21
- Downregulation of interferon
 regulatory factor 4 (IRF4)

Indirect Antitumor Effects

Co-stimulation and proliferation of T cells, NK cells, and cytokine production

Inhibits angiogenesis

Inhibits bone marrow stromal cell growth factor production

Cereblon as a Direct Target

- **Cereblon:** ubiquitously expressed E3 ligase protein
- **E3 ligase:** final enzyme in the ubiquitination cascade
- Ikaros and Aiolos: Transcriptions regulators of B and T-cell development
 - Selectively bound to cereblon



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Cereblon E3 Ligase Modulator (CELMoDs)

Golcadomide

- Potential 10-100 fold potency vs. lenalidomide
 - Driving cereblon to closed formation (bound to Aiolos/Ikaros)
 - Demonstrates ability to cross blood brain barrier
 - Preclinical studies

Iberdomide

- Potential over 20 fold potency vs. lenalidomide
 - Driving cereblon to closed formation (bound to Aiolos/Ikaros)

CELMoD Safety Profile Golcadomide Phase 1/2 in R/R NHL

- Part 1: Golcadomide monotherapy
- Part 2: Expansion to rituximab combination therapy (safety results)

Adverse Events	Golcadomide 0.2 mg + Rituximab (n=24)		Golcadomide 0.4 mg + Rituximab (n=20)	
	All Grade (%)	Grade 3(+)	All Grade (%)	Grade 3(+)
Neutropenia	67%	46%	70%	60%
Diarrhea	17%	0%	0%	0%
Constipation	8%	0%	10%	0%
Anemia	4%	0%	15%	15%
Asthenia	8%	4%	5%	0%
Fatigue	4%	0%	10%	5%
Pyrexia	4%	0%	10%	5%
Lymphopenia	0%	0%	15%	0%
Thrombocytopenia	0%	0%	15%	15%

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Chavez J et al. Efficacy and Safety of Golcadomide Combined with Rituximab in a Phase 1/2 Open label Study, Blood (2023) 142 (Supplement 1): 4496. Chavez J. Poster Presentation. American Society of Hematology (ASH) Annual Meeting; December 9 – 12, 2023; San Diego, CA

CELMoD Safety Profile Iberdomide +/- CD20 Therapy in Phase 1/2 Trial in R/R Lymphoma

<u>Cohorts</u>

- All lymphomas: Iberdomide
- BCL: with Rituximab
- MZL or FL: with obinutuzumab

Adverse Events N=45 patients	All Grade (%)	Grade 3(+)
Neutropenia	57%	49%
Anemia	24%	15%
Thrombocytopenia	22%	13%
Constipation	22%	n/a
Diarrhea	13%	2%
Pyrexia	17%	2%
Asthenia	13%	
Back pain	13%	
Muscle spasms	11%	
Cough	11%	
Blood creatinine increase	11%	

CELMoD Safety Profile Avadomide + Rituximab in Phase 1b Trial in R/R DLBCL and FL

Adverse Events N=68 patients	All Grade (%)	Grade 3(+)
Neutropenia	92.6%	66.2%
Febrile Neutropenia	7.4%	7.4%
Infections	23.5%	8.8%
Fatigue	22.1%	2.9%
Diarrhea	19.1%	2.9%
Rash	13.2%	1.5%
Nausea	16.2%	0%

*GCSF permitted Cycle 2 and on



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Novel Therapies in the Pipeline

BTK Degraders



Bruton Tyrosine Kinase Inhibitors (BTKi)



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TEC

ITK

EGFR

BTKi Resistance



Mechanism of BTK Degrader

Degrader: Linker with a ligand for BTK and another for E3 ligase

The degrader binds to BTK protein and E3 ligase, forming a complex

Ubiquitination begins, leading to proteasome degradation



BTK Degrader Safety Profile BGB-16673 Phase 1 in R/R CLL or SLL

- Degradation of both wild type and mutant forms of BTK
- Preliminary
 Pharmacokinetic data:
 - Metabolized by CYP3A4
 - Interaction with pH lowering medications

Adverse Events N=49 patients	All Grade (%)	Grade 3+ (%)
Fatigue	33%	Not reported
Contusion	29%	Not reported
Anemia	22%	Not reported
Diarrhea	22%	Not reported
Neutropenia	22%	20%

*No hypertension, atrial fibrillation/flutter reported to date

BTK Degrader Safety Profile NX-5948: Phase 1 in R/R B-cell malignancies

- Degradation of wild type and mutant forms of BTK
- Preliminary
 Pharmacokinetic data:
 - Ability to cross the blood-brain barrier

Adverse Events N=87 patients	All Grade (%)	Grade 3+ (%)
Purpura/contusion	44.1%	0%
Thrombocytopenia	23.5%	2.9%
Petechiae	29.4%	0%
Fatigue	20.6%	0%
Neutropenia	17.6%	14.7%
Rash	23.5%	2.9%
Headache	23.5%	0%

*No new onset of atrial fibrillation/flutter or hypertension

BTK Degrader + Immunomodulatory Activity Safety Profile NX-2127: Phase 1 in R/R B-cell malignancies

- BTK Degrader + ubiquitination of targets (Ikaros and Aiolos) to increase T-cell activation
- Degrades wild type and C481-mutated BTK protein

Adverse Events N=47 patients	All Grade (%)	Grade 3(+)
Fatigue	48.9%	n/a
Neutropenia	38.3%	n/a
Hypertension	14.9%	n/a
Anemia	12.8%	n/a
Contusion	27.7%	n/a
Atrial Fibrillation	12.8%	6.4%





Summary

- Positive preliminary data so far utilizing CELMoDs and BTK Degraders to overcome resistance in the relapsed/refractory setting
- Future areas of interest
 - Safety and efficacy in combination therapy
 - Safety and efficacy in refractory patients with known resistance
 - Comparison to standard of care therapy

Clinical Trials at University of Chicago Medicine

- A Phase IB, Open-Label, Multicenter Study Evaluating the Safety, Pharmacokinetics, and Efficacy of Mosunetuzumab or Glofitamab in Combination with CC-220 and CC-99282 in Patients with B-Cell Non-Hodgkin Lymphoma
- A Phase 1, Dose Escalation, Safety and Tolerability Study of NX-2127, a Bruton's Tyrosine Kinase (BTK) Degrader, in Adults with Relapsed/Refractory B-cell Malignancies.



Questions?

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