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INTRODUCTION

- Glioblastoma (GBM) is the most prevalent and aggressive primary brain tumor type with an abysmal prognosis.**
 - GBM features an immunologically dampened tumor microenvironment and limited neoantigen production.
 - Novel therapeutic strategies for GBM are urgently needed.
- A well-characterized GBM-associated mutation can elicit an anti-tumor immune response: The EGFRvIII mutation.**
 - The cancer-driver mutation is detected in approximately 30% of patients at the time of diagnosis and plays a pivotal role in the emergence of GBM.
 - Its highly immunogenic nature represents an ideal focal point for cutting-edge mRNA-LNP candidate therapeutics.
 - (CAR)-T cells directed against EGFRvIII have shown promise in a phase 1 study for GBM treatment, paving the way for a vaccination-based approach.

Methodology

- Evaluate the efficacy of proprietary lipid nanoparticle (LNP) – mRNA vaccines targeting EGFRvIII in a GBM mouse model.**
- Develop a murine transplantable GBM tumor model based on the C3H mouse strain.**
 - C3H-associated MHC molecules bind the immunogenic EGFRvIII sequence to trigger anti-EGFRvIII T cell responses, unlike C57BL/6 mice.
 - Somatically engineered glioblastomas harbor CRISPR double knockouts of Cdkn2a and Pten and stably overexpress EGFRvIII.
 - Establishing transplantable neurosphere cultures for orthotopic tumor initiation in syngeneic and sex-matched recipients.
- One week after intracranial tumor cell implantation of 6-8 week-old female mice (day 0; n=10), half the animals were administered either buffer (control cohort) or our novel anti-EGFRvIII mRNA-LNP vaccine (experimental cohort).**
- Four intramuscular injections before monitoring tumor progression by MRI on day 30.**

Figure 1 - The EGFRvIII mutation

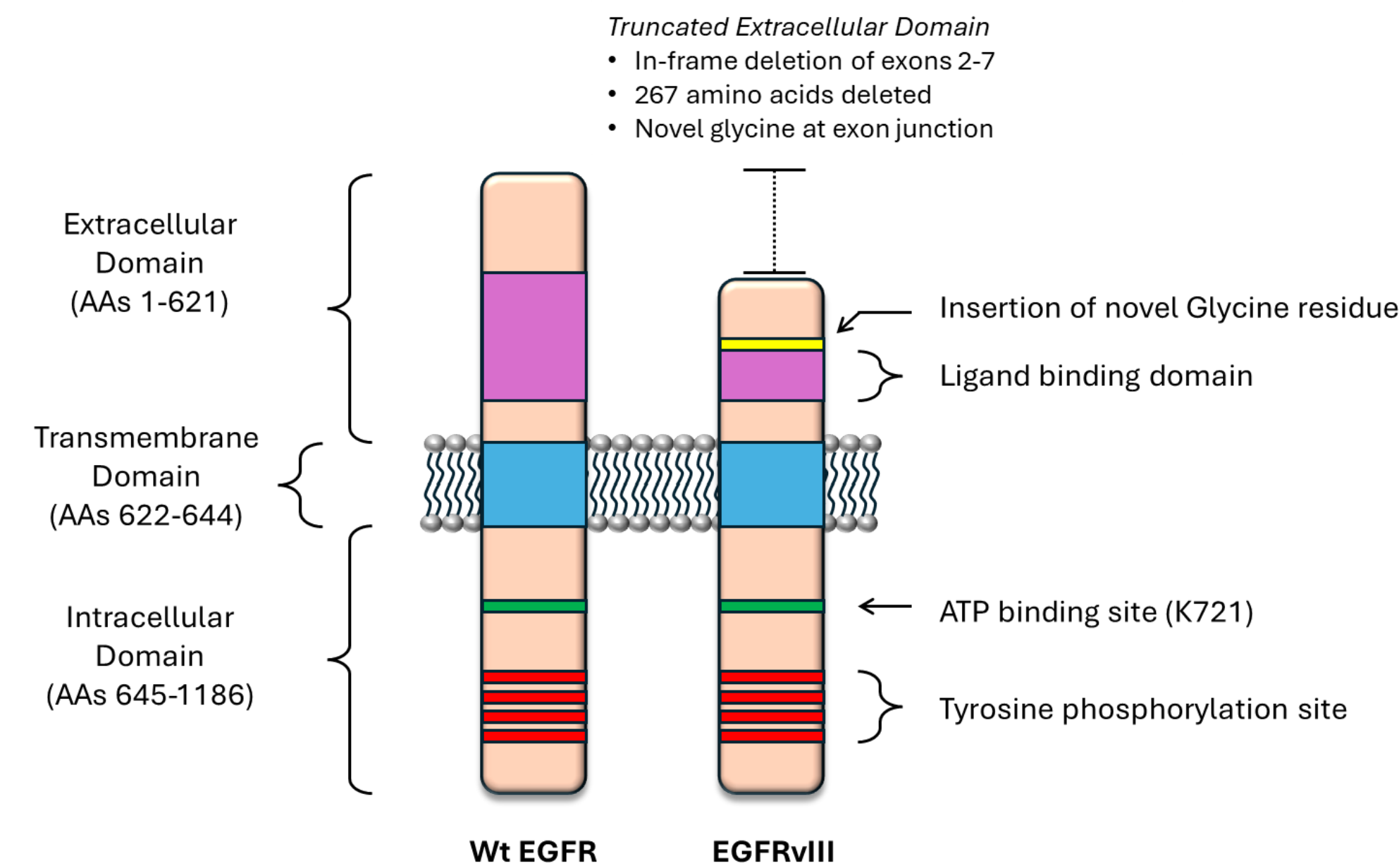


Figure 2 – Development of a murine transplantable GBM tumor model based on the C3H mouse strain.

Syngeneic tumour survival on a C3H background

Mutation combination: EGFRvIII OE (human)/ CDKN2A KO/ PTEN KO

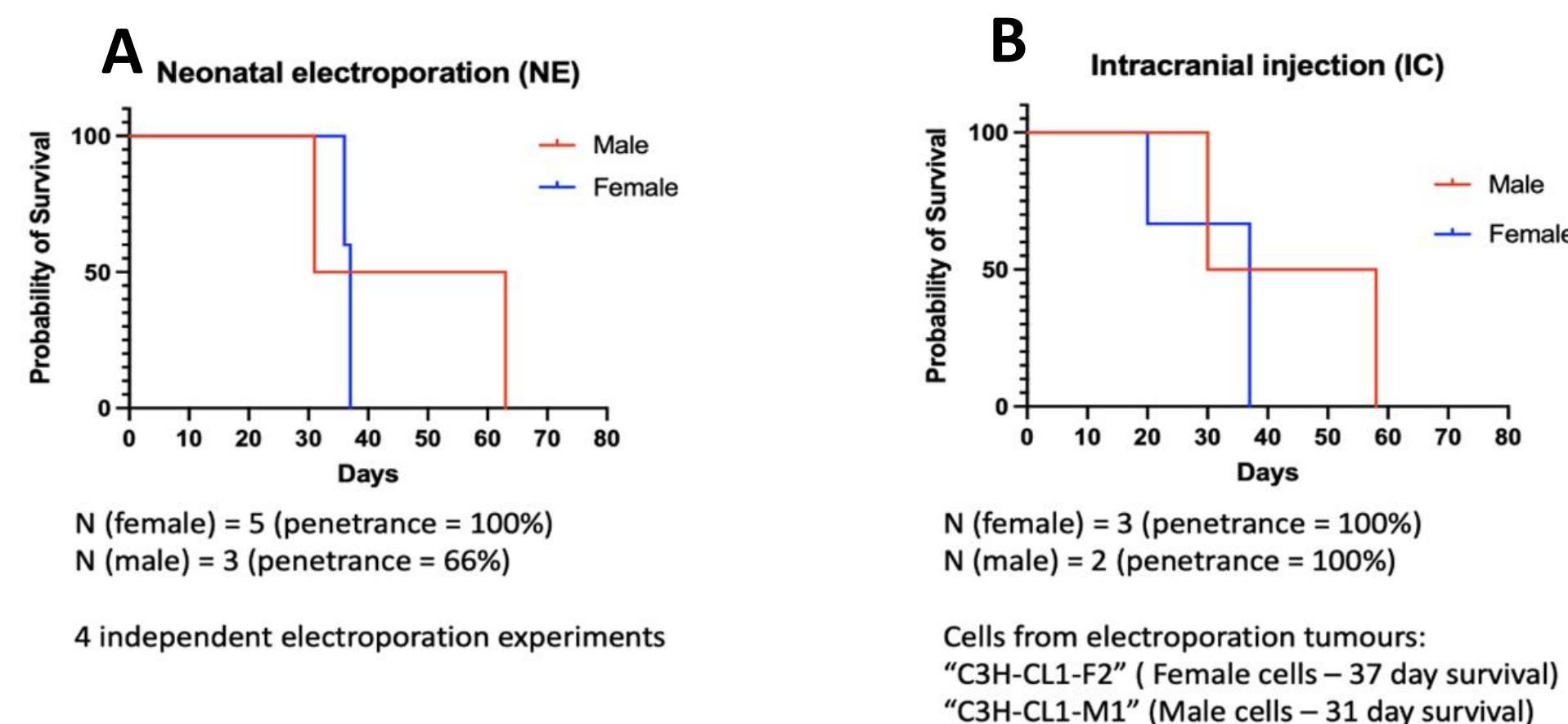


Figure 2 – Generation of a C3H-derived transplantable GBM tumor model

The parental tumors of these two, sex-discriminative, lines were generated by *in vivo* co-electroporation of constructs into the subventricular zone of early postnatal (P1-3) pups. Constructs used were pB-EGFRvIII-GFP and CRISPR constructs for knockouts of Cdkn2a and Pten. Survival curve of female and male electroporated pups (A). After animals reached the humane endpoint, tumors were dissected from the brains, and cell lines were grown as neurosphere cultures in defined serum-free media. The ability of lines CH3-CL1-F2 (female line) and CH3-CL1-M1 (male line) to initiate tumors orthotopically in sex-matched syngeneic mice was validated by injection of 1x10⁵ cells into the right striatum of 6-8 week-old female and male mice, respectively (B).

Figure 3 – Flow cytometric evaluation of mRNA-encoded EGFRvIII expression in 293T cells

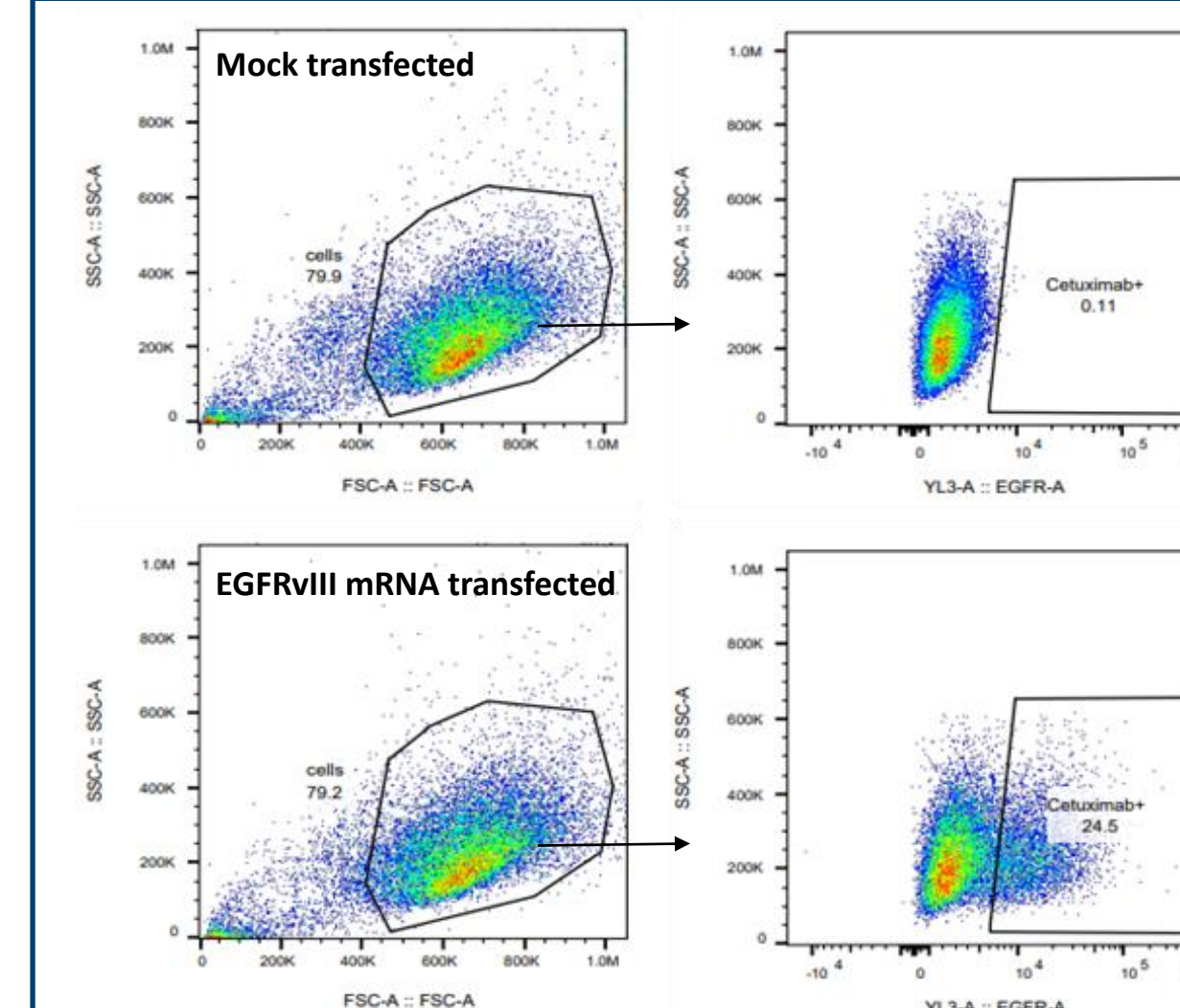


Figure 3 – EGFRvIII mRNA is functional
293T cells were transfected using the EGFRvIII-encoding mRNA and mMessengerMax. 60 hrs later, cells were stained with an anti-EGFRvIII antibody (Cetuximab).

Figure 4 – Schematic Experimental Setup

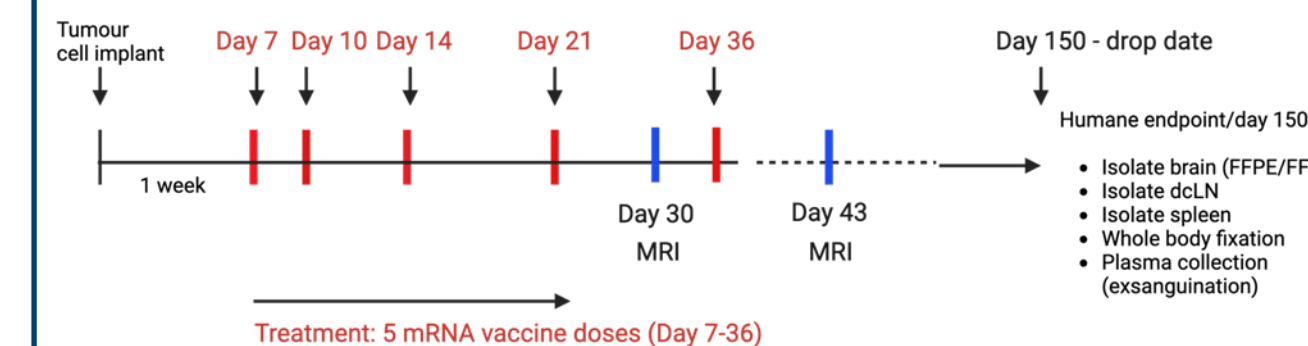


Figure 5 – MRI analysis shows no tumor signs in EGFRvIII vaccine-treated mice

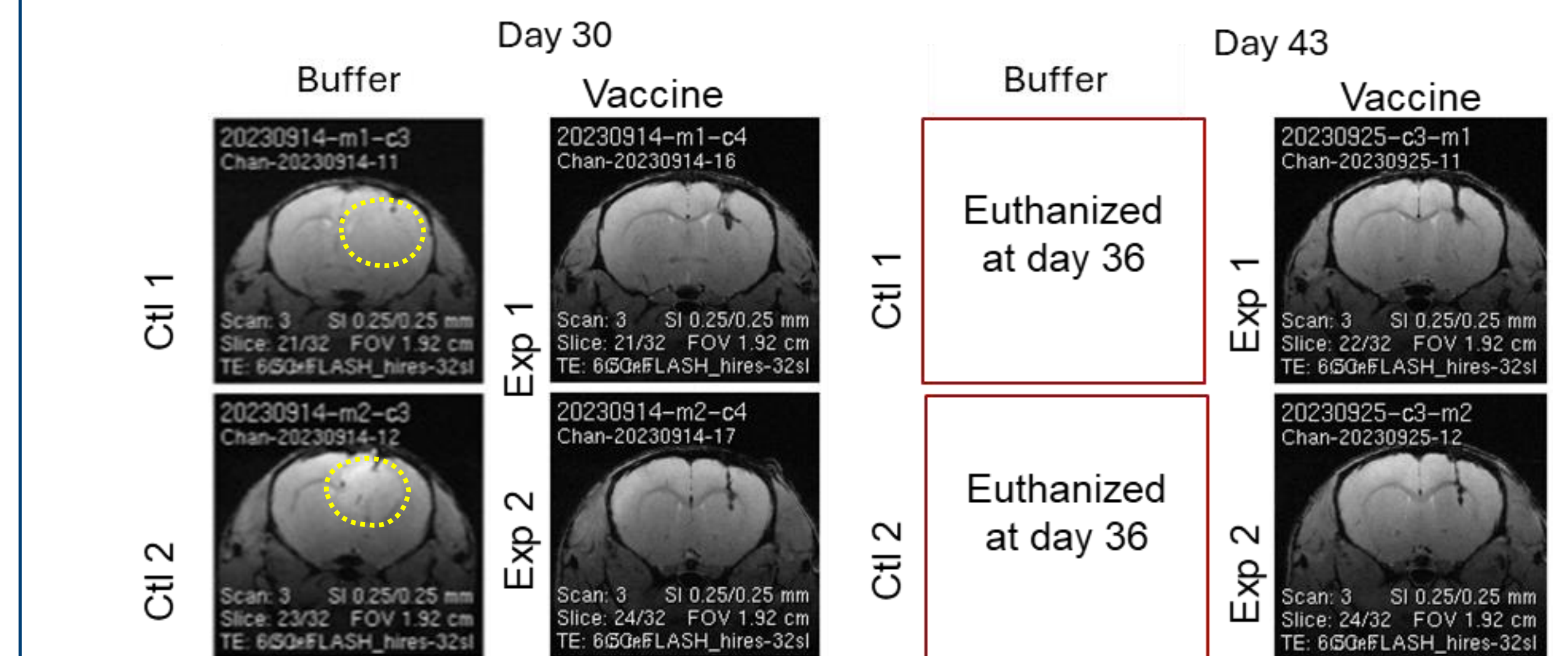


Figure 5 – Generation of a C3H-derived transplantable GBM tumor model

MRI assessment of C3H female recipients at day 30 and day 43. Images are shown at the level of the injection needle tract. EGFRvIII vaccine-treated animals show no evidence of tumor. Buffer-treated animals showed bulky tumors (iso-intense compared to the normal cortex and striatum; dashed line).

CONCLUSIONS

- A preclinical pilot study investigating a novel anti-EGFRvIII vaccine for therapeutic cancer treatment yielded remarkable efficacy in an engineered GBM mouse model.
- 100% of vaccine-treated animals survived orthotopic GBM transplantation, whereas all control mice succumbed to tumor-associated symptoms by day 38.
- MRI scans (days 30 and 43) and IHC analyses (at day 150, endpoint) revealed no detectable tumor cells in vaccine-protected mice.
- Additional POC for anti-GBM vaccines are ongoing as Providence Therapeutics' program moves toward clinical trials 2025.

Figure 6 – Vaccine-treated mice survive tumor cell transplantation

Survival of female EGFRvIII⁺ GBM bearing C3H mice

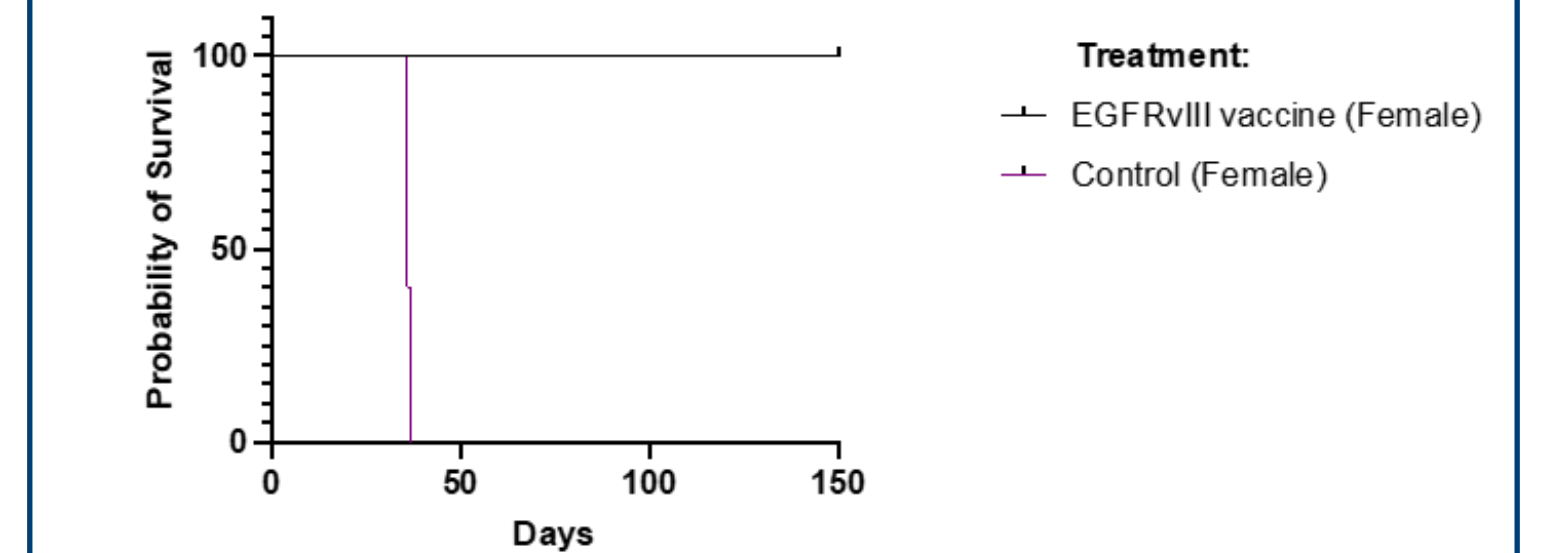


Figure 6 – Survival Data

All buffer-treated control mice died by day 38, whereas vaccine-treated animals survived the tumor cell transplantation with no signs of tumor development.