

# Development of new targeted agents for TNBC

Dr Nicholas Turner

ESMO 2012



The Royal Marsden  
NHS Foundation Trust



## **Relevant disclosures**

Honoraria and/or Research funding

Novartis  
AstraZeneca  
Clovis  
EOS  
Tesarro

# Therapeutic strategies for TNBC

- Common genetic events
- Targeting TNBC subtype specific features
- Rare targetable oncogenic events
  - Discussed by Lajos Pustzai

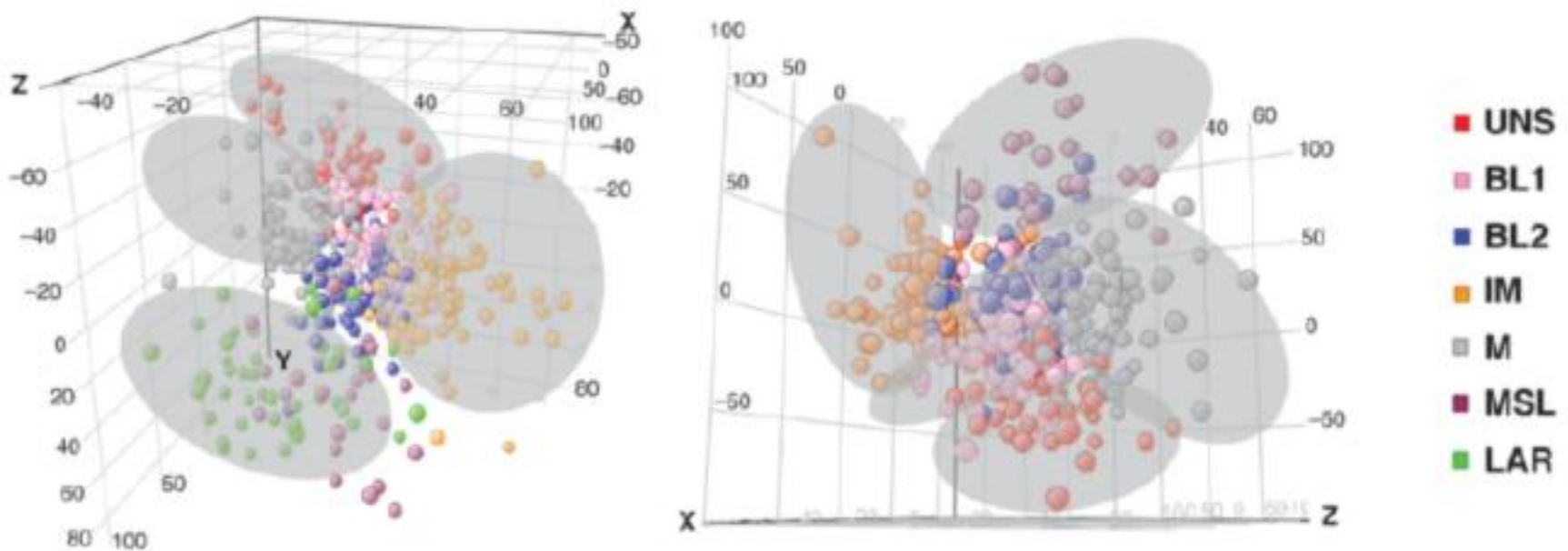


# Identification of human triple-negative breast cancer subtypes and preclinical models for selection of targeted therapies

Brian D. Lehmann,<sup>1</sup> Joshua A. Bauer,<sup>1</sup> Xi Chen,<sup>2</sup> Melinda E. Sanders,<sup>3</sup>  
A. Bapsi Chakravarthy,<sup>4</sup> Yu Shyr,<sup>2</sup> and Jennifer A. Pietenpol<sup>1</sup>

<sup>1</sup>Department of Biochemistry, <sup>2</sup>Department of Biostatistics, <sup>3</sup>Department of Pathology, and <sup>4</sup>Department of Radiation Oncology, Vanderbilt-Ingram Cancer Center, Vanderbilt University School of Medicine, Nashville, Tennessee, USA.

21 publically available gene expression data sets  
587 TNBC



# Subtypes of Triple negative breast cancer



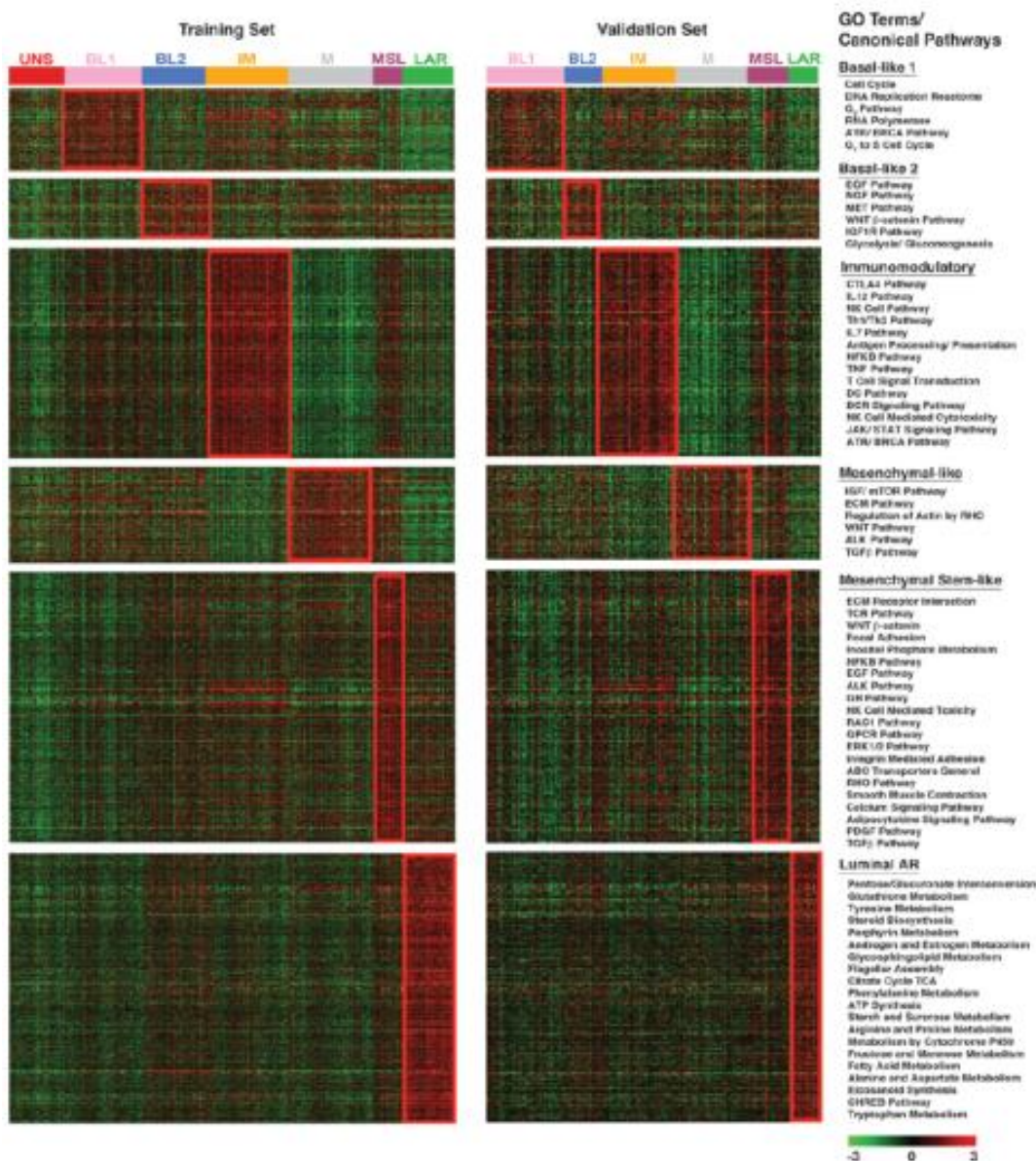
Basal-like 1 and 2

Immunomodulatory

Mesenchymal-like

Luminal-AR

# Subtypes of Triple negative breast cancer



Basal-like 1 and 2

Immunomodulatory

Basal-like

Mesenchymal-like

Luminal-AR

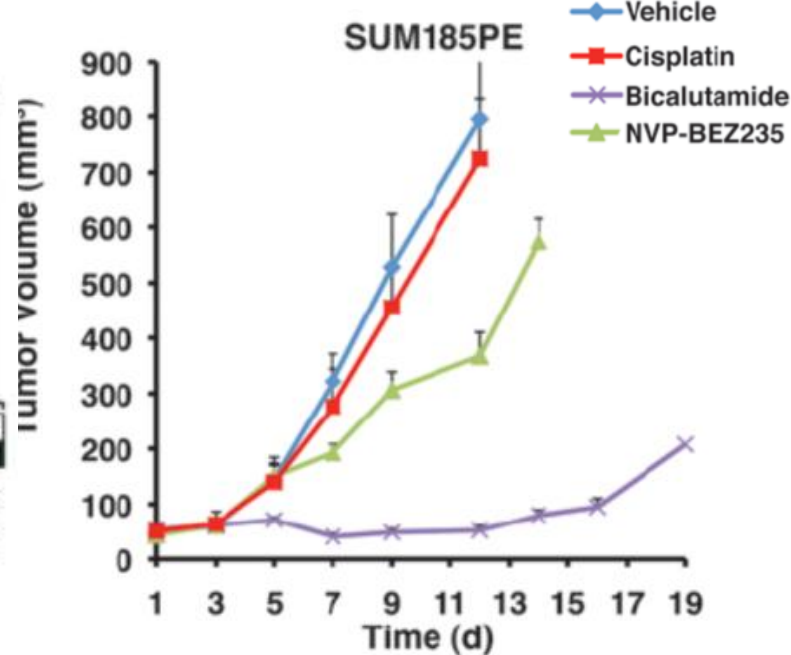
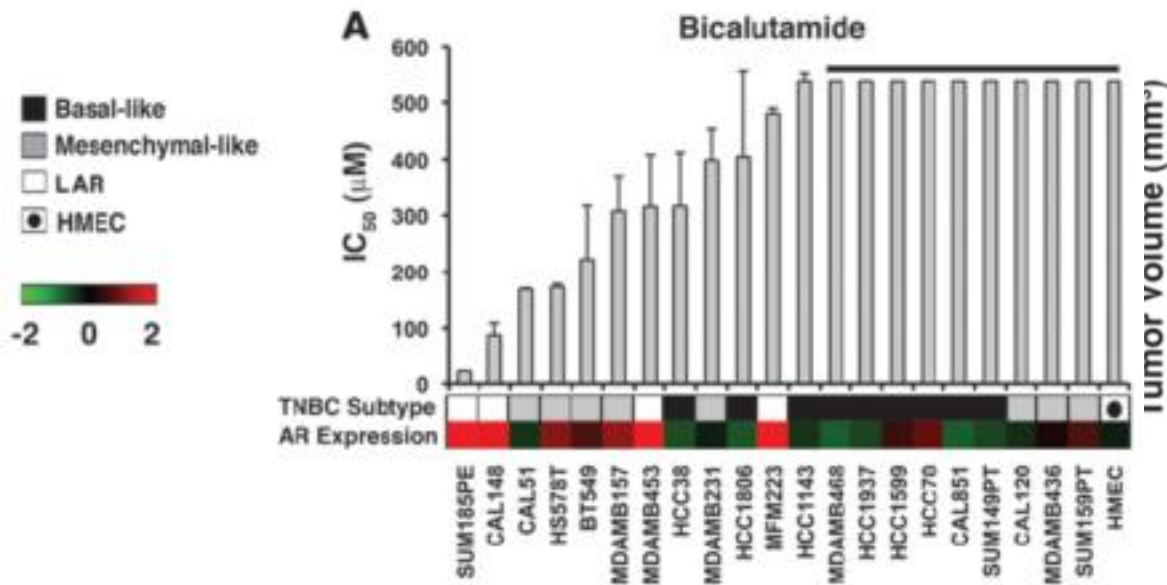


# Luminal AR cell lines

Express androgen receptor

Sensitive *in vitro* to Bicalutamide

High frequency of *PIK3CA* mutations



# Targeting the androgen receptor (AR) in women with AR+ ER-/PR-metastatic breast cancer (MBC)

ER/PR negative ( $\leq 10\%$  by IHC) but AR positive ( $>10\%$  IHC)

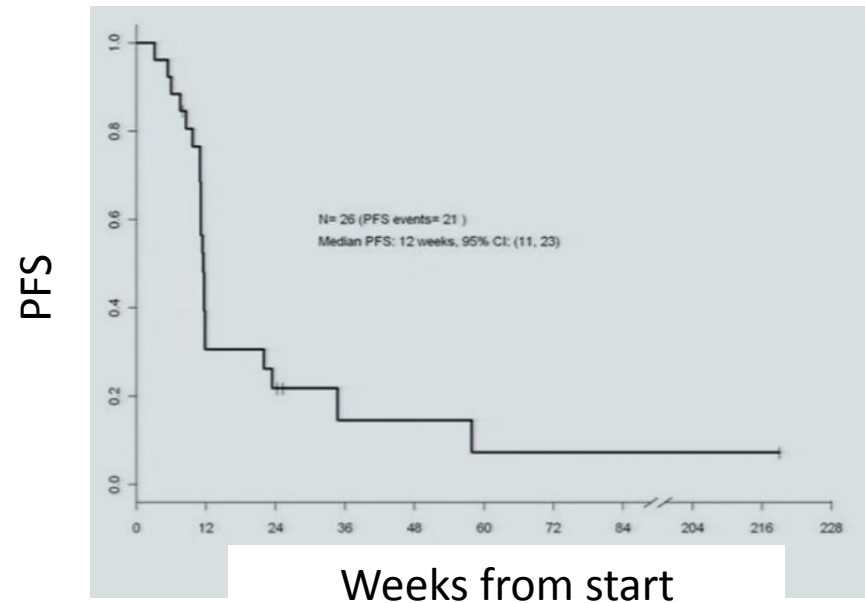
Bicalutamide 150mg qd

Screened 424 patients 12% AR positive – 28 treated on study

0% Response rate

21% (5/24) stable disease  $>6$  months

Trials with Abiraterone and Enzalutamide ongoing





# Subtypes of Triple negative breast cancer



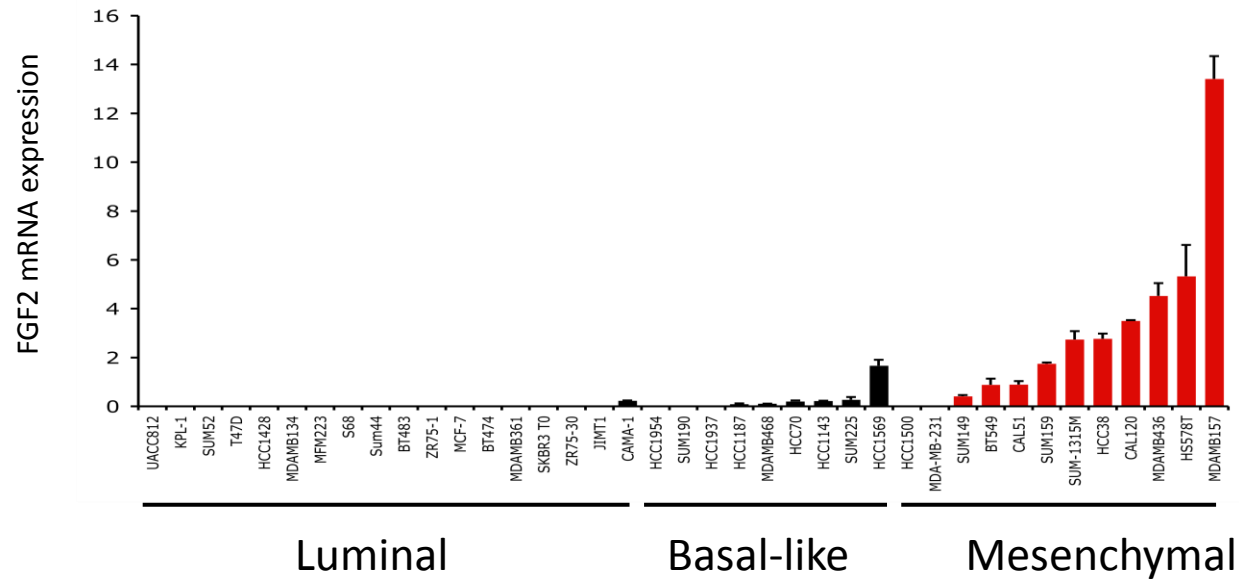
Basal-like 1 and 2

Immunomodulatory

Mesenchymal-like

Luminal-AR

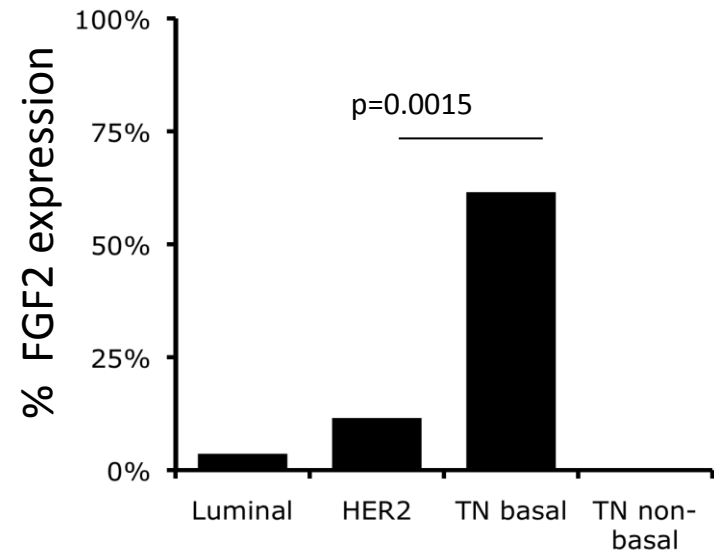
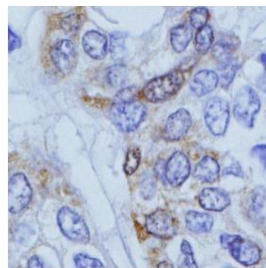
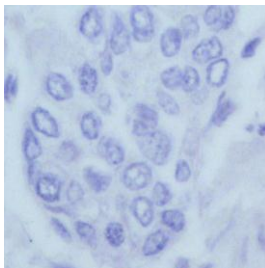
# FGF2 expression in TN mesenchymal-like cell lines



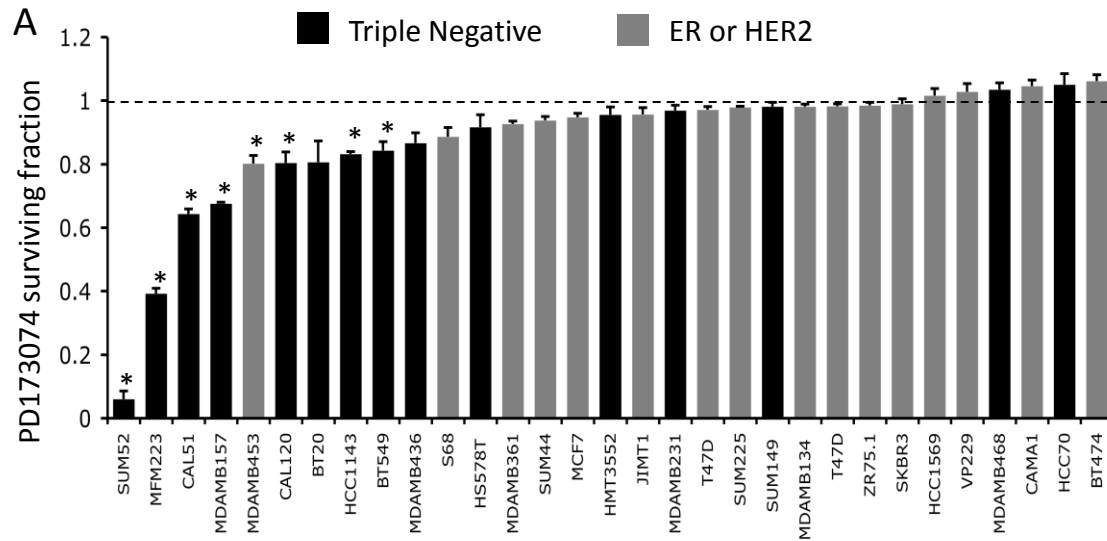
## FGF2 IHC

Negative

Positive



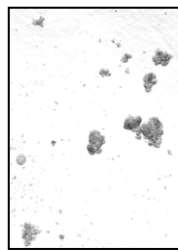
# FGF2 cell lines are sensitive to an FGFR inhibitor



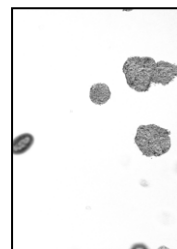
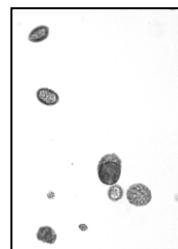
PD173074  
FGFR inhib

**C**

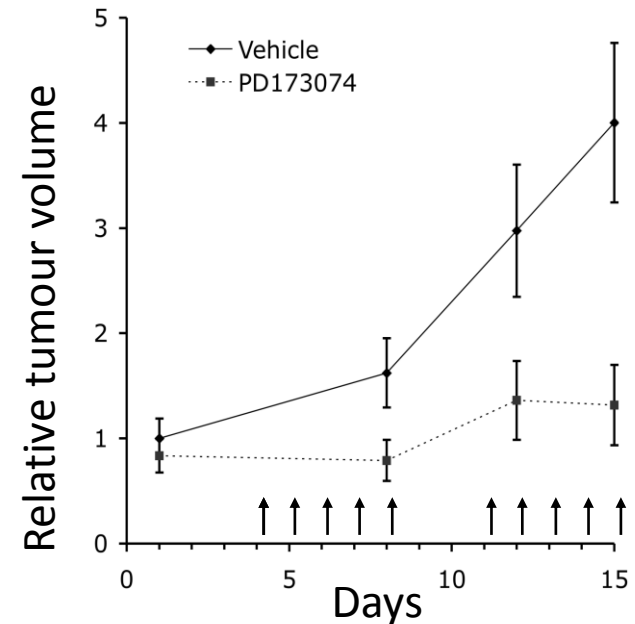
CAL51  
Mesenchymal-like



T47D  
ER + luminal

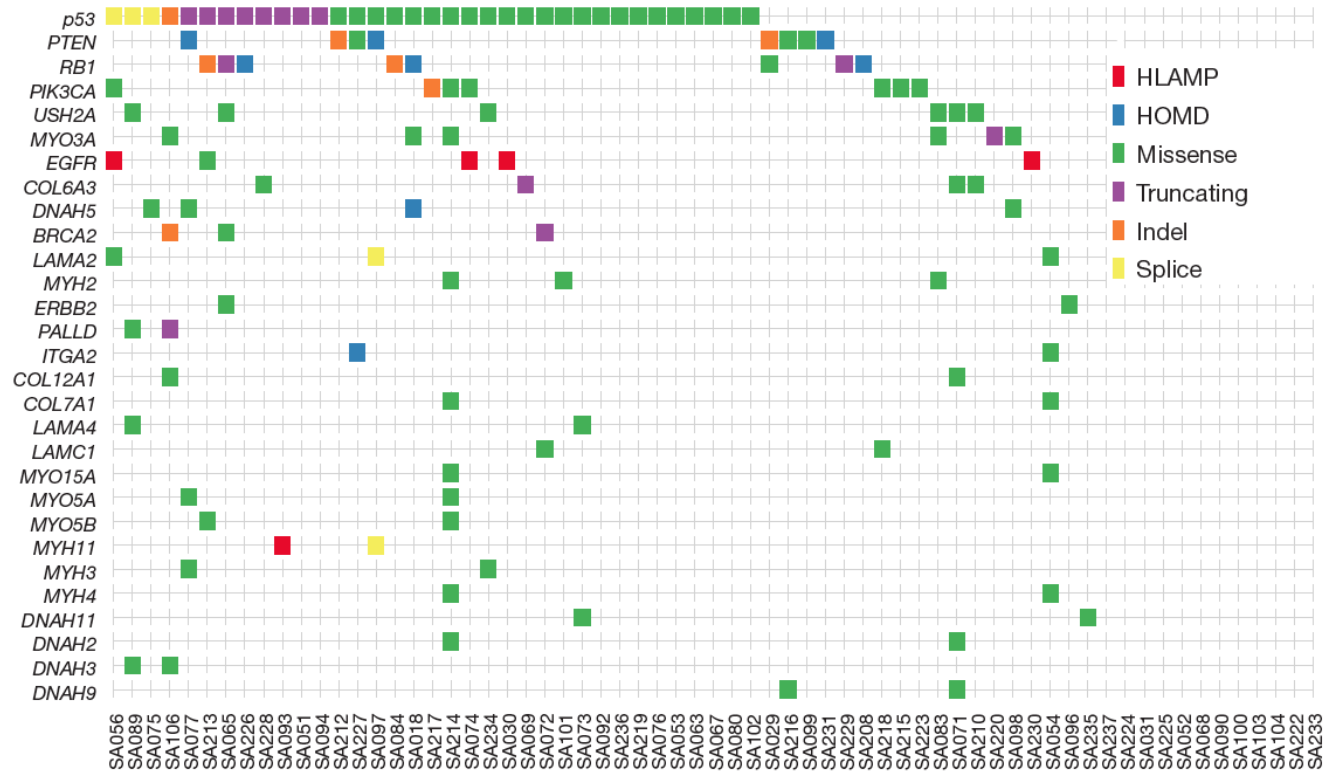


CAL51 xenograft



# TN breast cancer - common genetic events?

**a**



Shah et al Nature 2012

Common genetic events

~75% Mutation *TP53*

~40% Myc amplification

~20% Mutation/loss RB

~15-20% Mutation of *BRCA1* or *BRCA2*

TCGA Nature 2012

# BRCAness in TN breast cancer

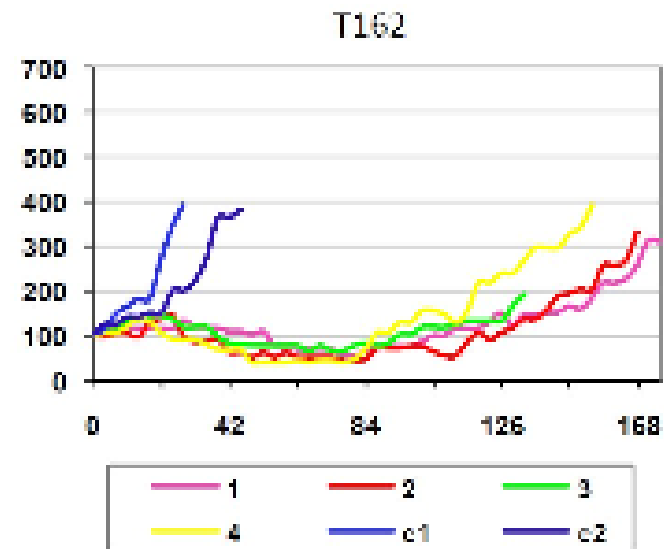
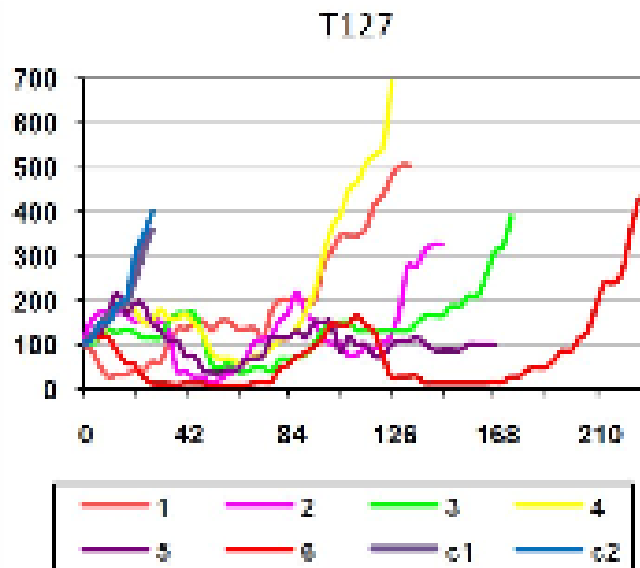
*BRCA1* and *BRCA2* mutated in ~15-20% cancers  
~60% germline and ~40% somatic

Shah et al Nature 2012, TCGA  
Nature 2012

*BRCA1* promoter methylation in ~15%

Turner et al Oncogene 2012

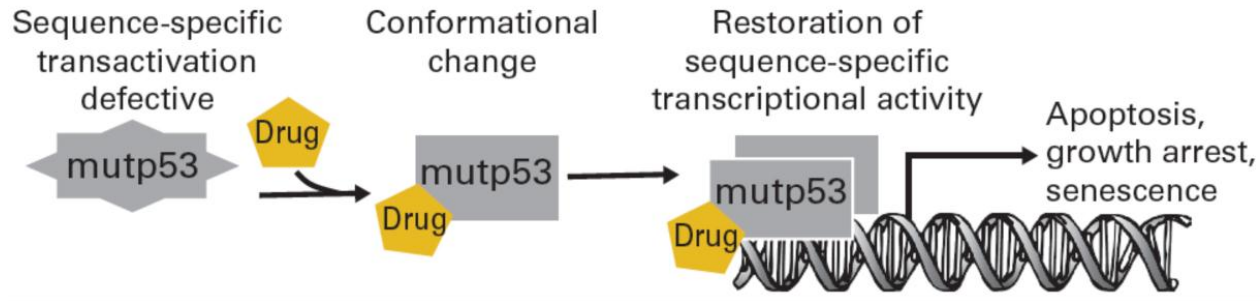
Sensitivity of *BRCA1* methylated primary xenografts to olaparib



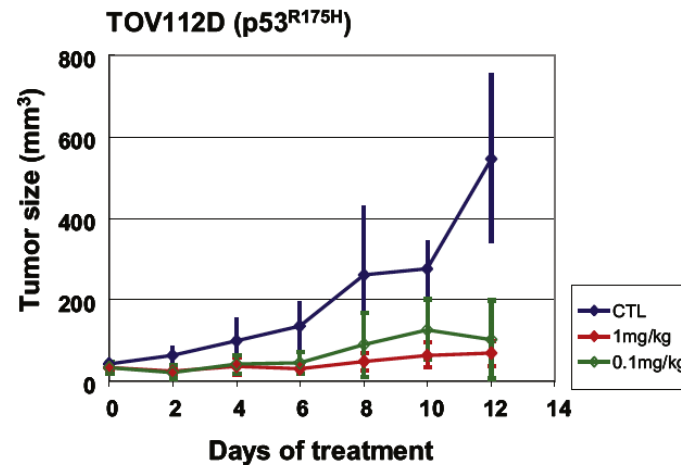
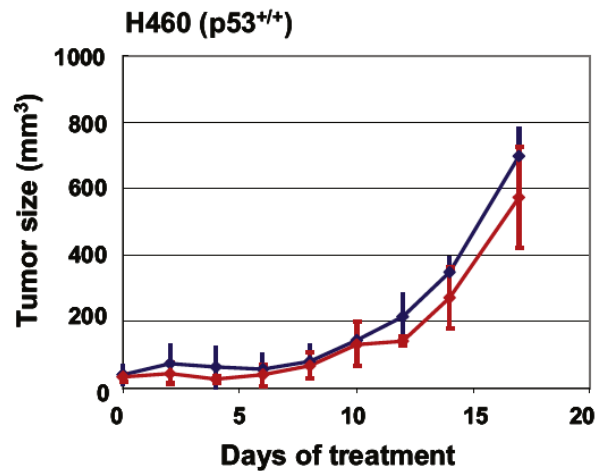
SABCS 2011 Jos Jonkers NKI

Like all targeted therapies selection is the key

# Restoring activity to mutant *TP53*



Lehman and  
Pietenpol JCO 2012



Yu et al Cancer  
Cell 2012

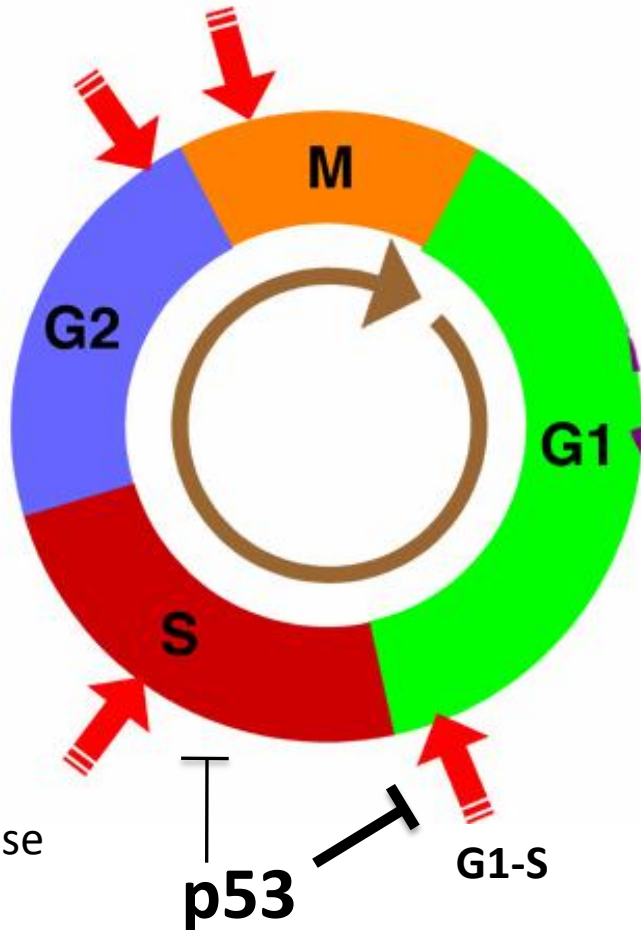


# DNA damage checkpoints

*TP53* wild-type

Spindle checkpoint

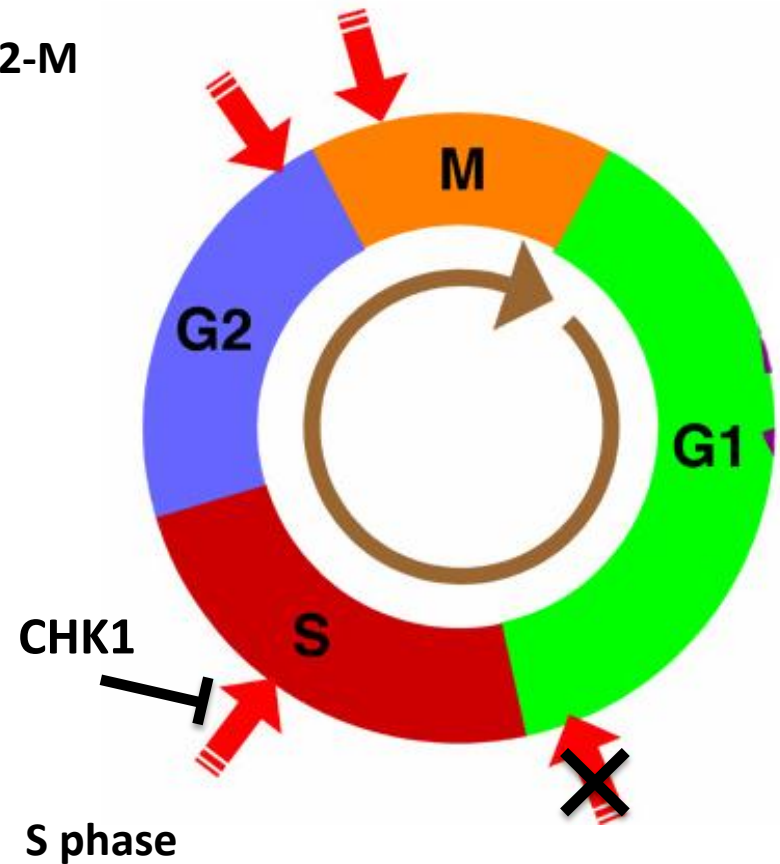
G2-M



*TP53* mutant

Spindle checkpoint

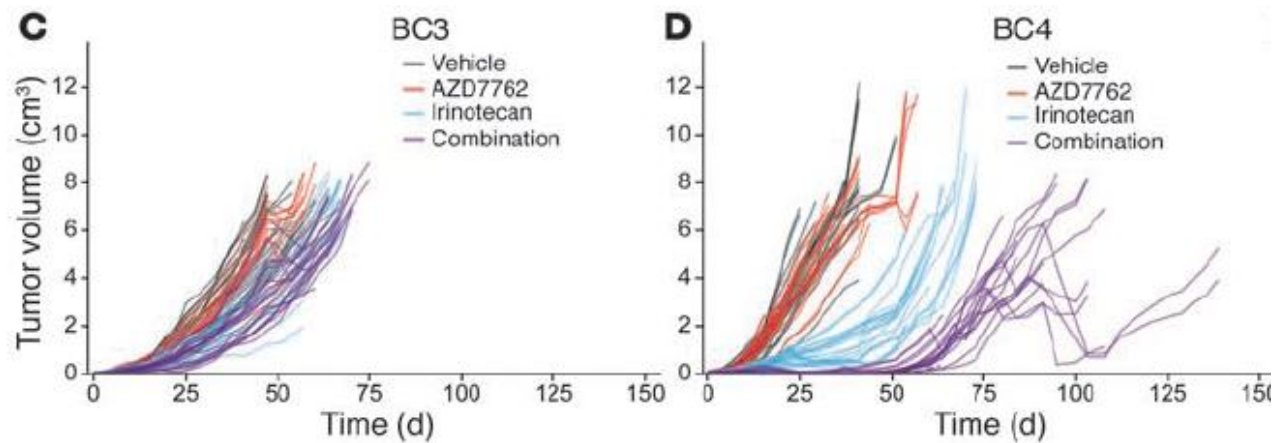
G2-M



# Targeting cell cycle defects of *TP53* TN breast cancer

*TP53* mutant cancer cells rely on *Intra-S phase and G2/M checkpoint* mediated by ATR-CHK1 access

CHK1 inhibitors sensitize *TP53* mutant cancers selectively to chemotherapy



*TP53* wildtype

*TP53* mutant

Ma et al JCI 2012

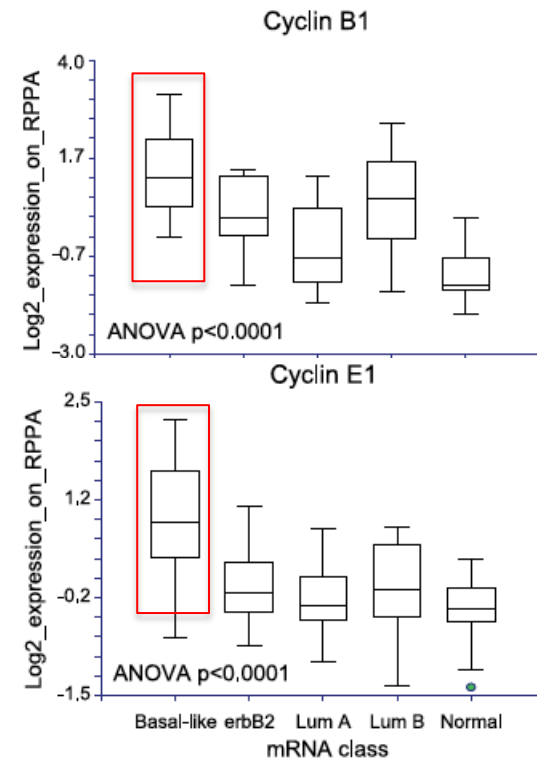
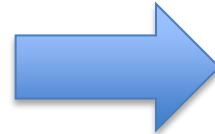
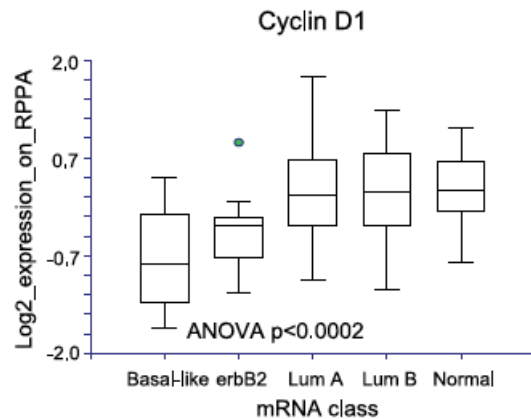
Preliminary evidence of efficacy in TNBC in phase 1 trials

Problems with tolerability

Fracasso et al CCP 2011

# Basal-like cancers - primed for mitotic entry

Basal-like cancers use cyclin E and mitotic cyclins to drive proliferation

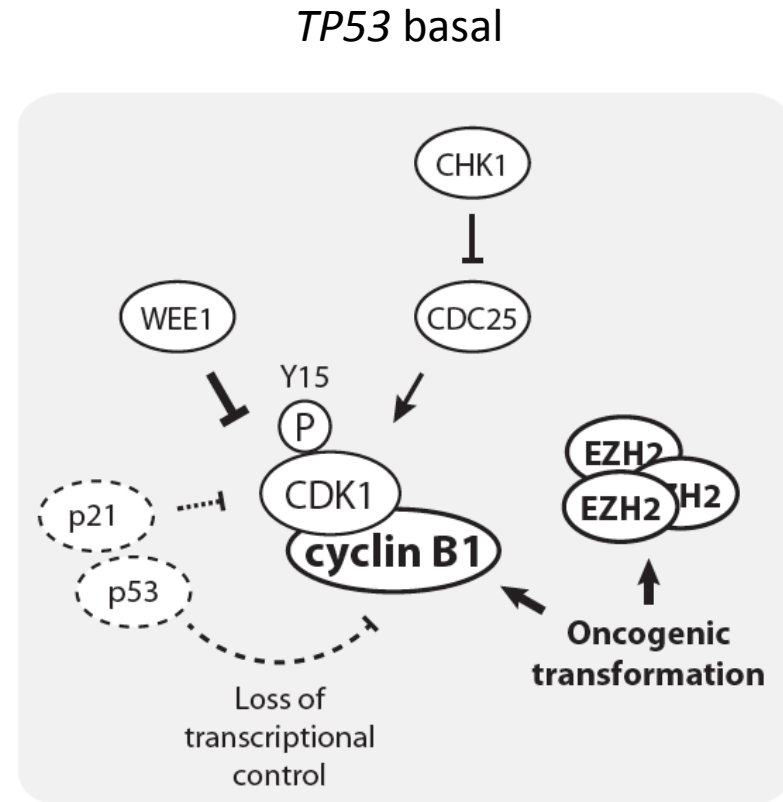
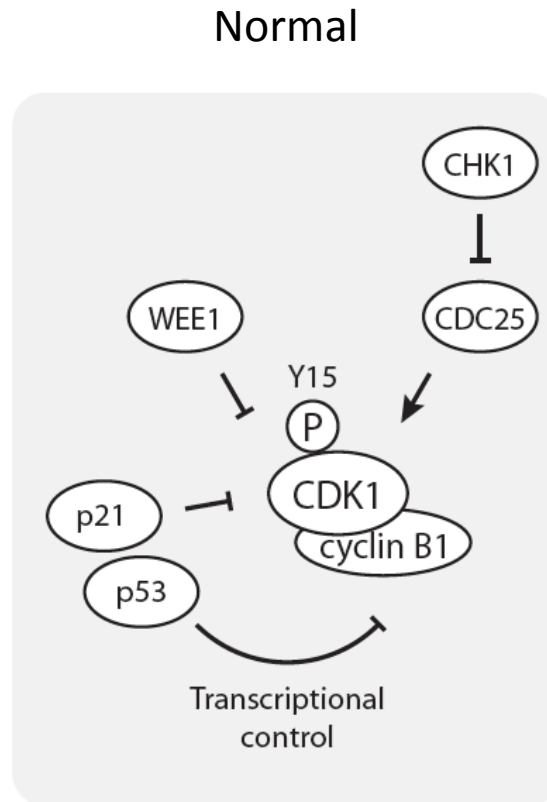
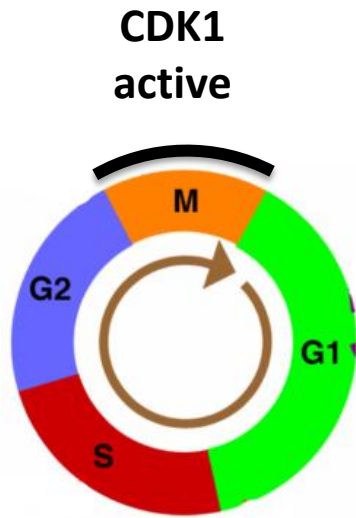


Agarwal et al CCR 2009

Driven by FOXM1 transcription factor

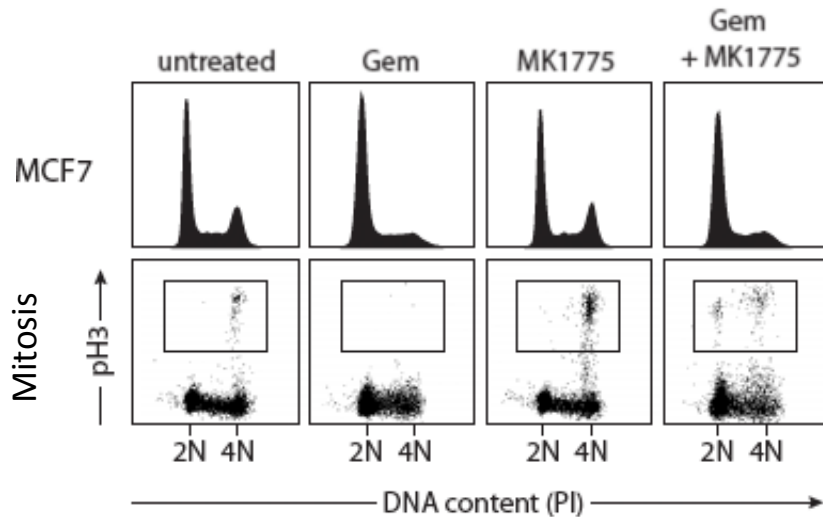
TCGA Nature 2012

# Basal-like cancers - primed for mitotic entry



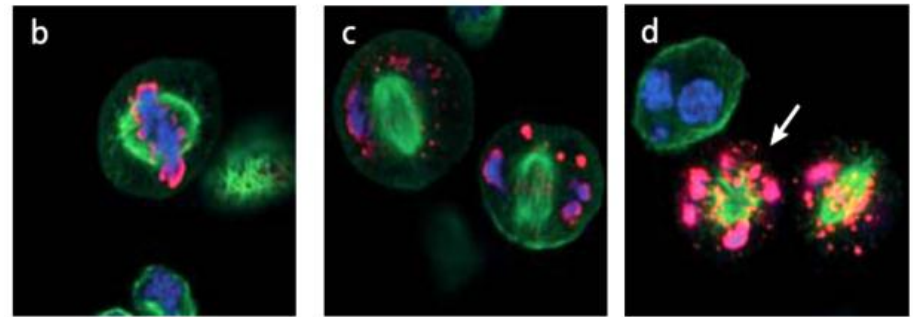
# WEE1 inhibition forces premature mitotic entry

*TP53* wild type



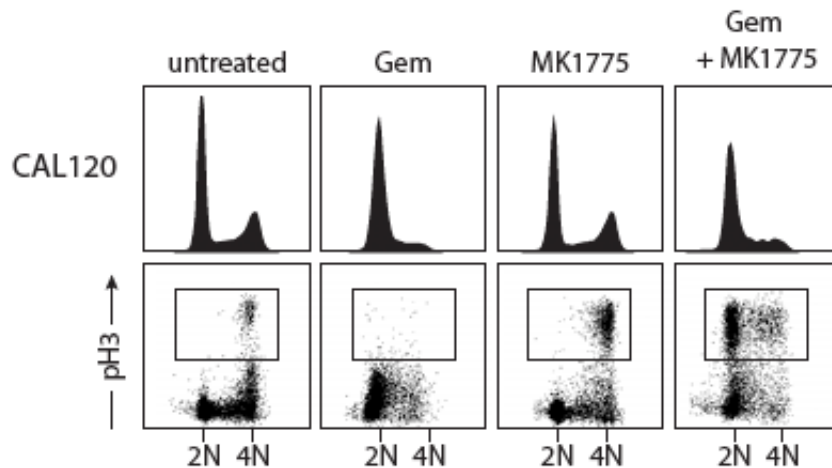
Control

Gem-WEE1



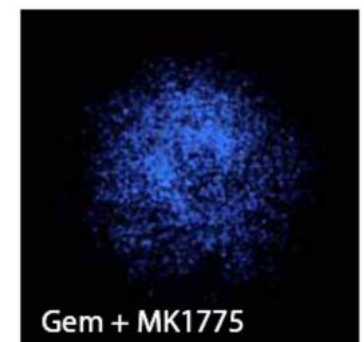
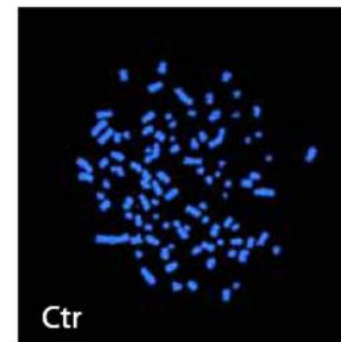
Chromosome spreads

*TP53* mutant



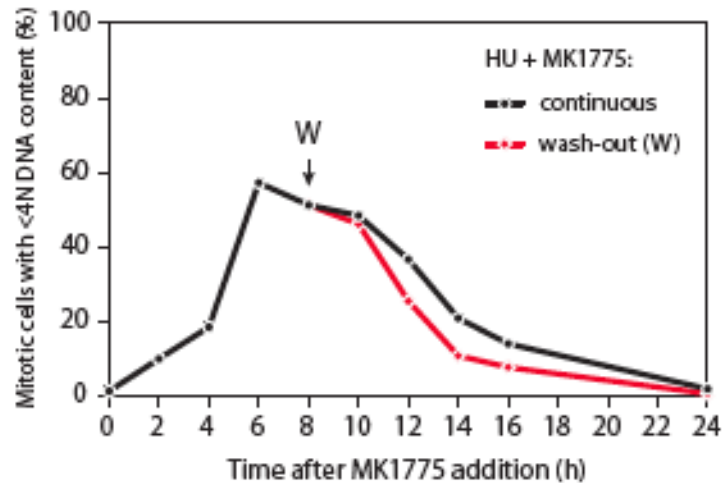
Control

Gem-WEE1

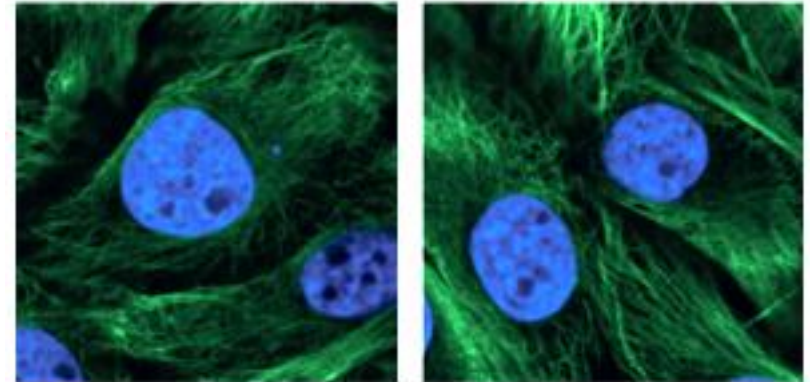


# WEE1 as a therapeutic target in *TP53* mutant breast cancer

B

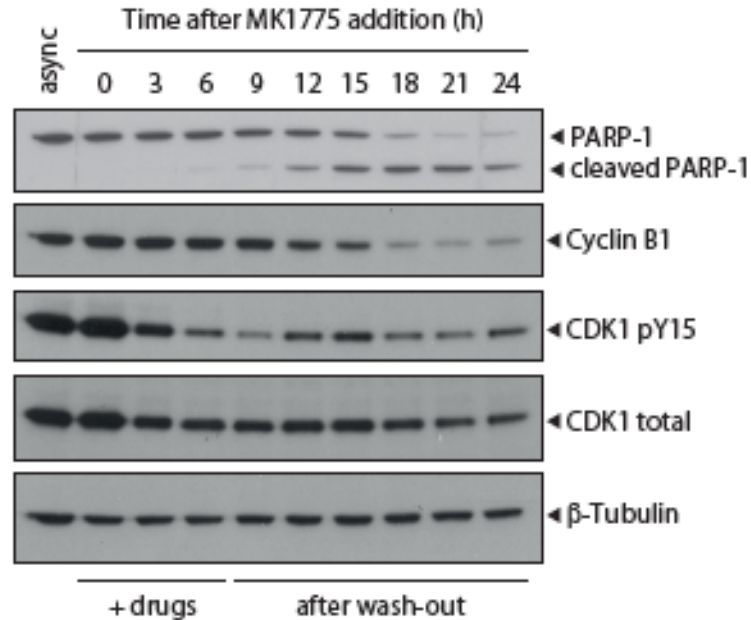


Untreated

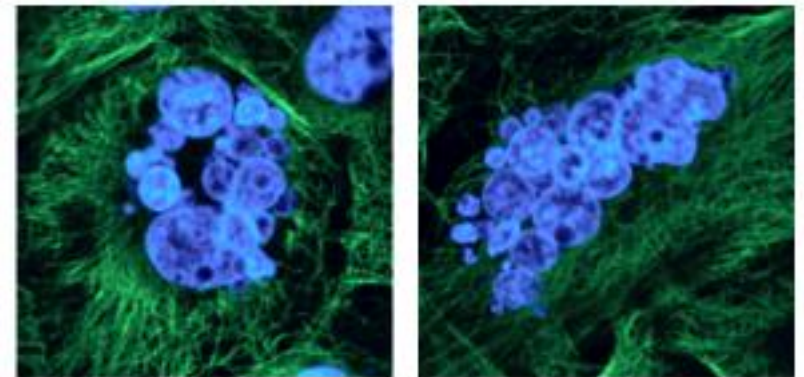


normal

C



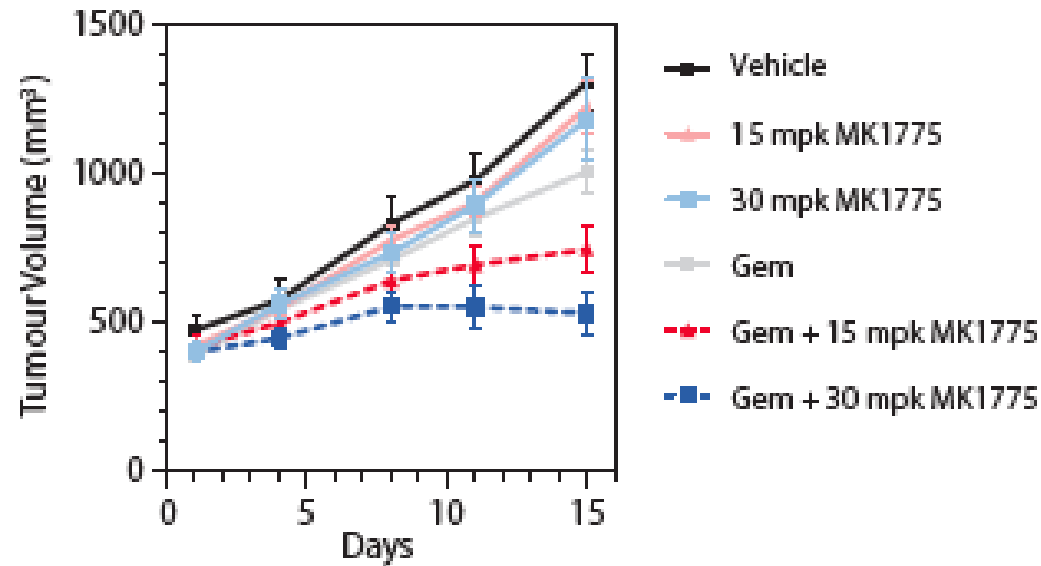
Post forced mitosis



microtubulated

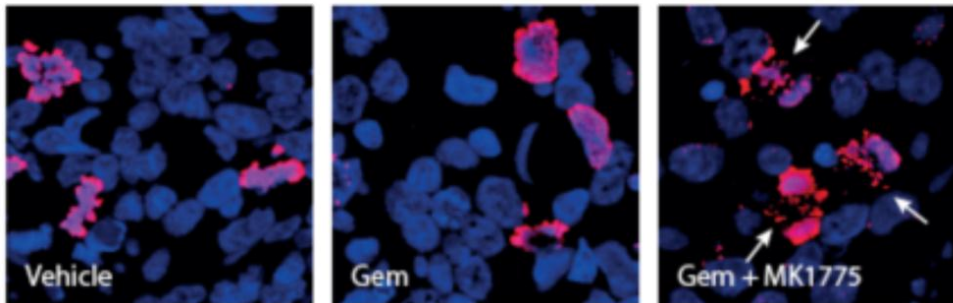


# WEE1 inhibitors targets basal-like *TP53* mutant cancer

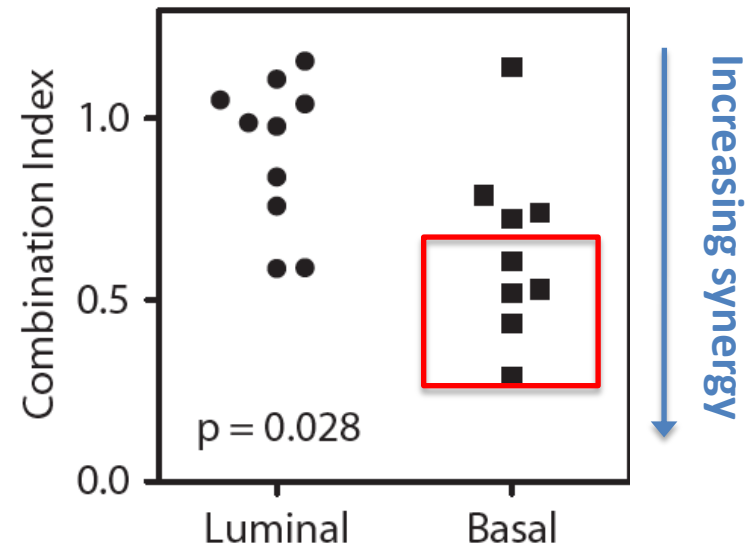


Forced mitosis *in vivo*

Xenografts + MK1775 (2.5 days)



Synergy with gemcitabine



Gemcitabine – WEE1 inhibitor combinations in phase I/II

# Common targets for TN breast cancer?

*TP53* mutation in basal-like cancers is common and may be targetable

BRCA1/2 loss is a relatively common event

Within subtypes of TN there may be common events

Luminal TN and androgen receptors

# Acknowledgments

## **Breakthrough Research Centre**

Marieke Aarts  
Alex Pearson  
Rachel Sharpe  
Maryou Lambros  
Maria A Lopez-Garcia  
Rachael Natrajan  
Jorge S Reis-Filho  
Alan Ashworth

## **Merck**

Carlo Toniatti  
Stuart Shamway

## **Nottingham**

Ian Ellis  
Andrew Green

