

# Imaging Mass Spectrometry of novel drug in human tumor specimens: Distribution of unlabeled drugs to support early phase clinical trial

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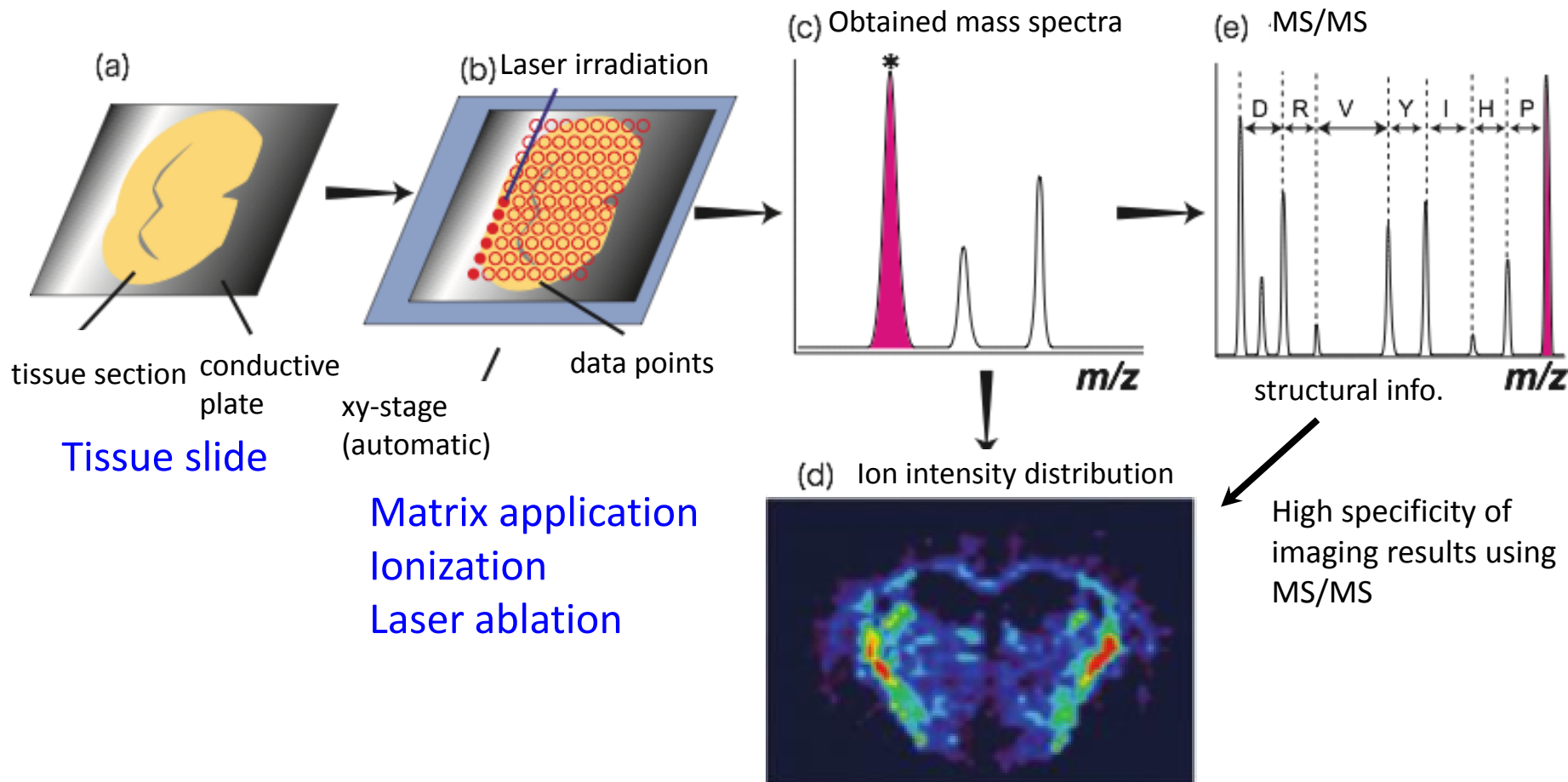
## Tatsunori Shimoi

The author have **no financial conflicts of  
interest** to disclose  
concerning the presentation.

# Background

- Assessment of drug pharmacokinetics is an important component of early phase drug development.
- Conventional pharmacokinetic analysis has limitations in providing a comprehensive assessment of spatial drug distribution in tissues.
- **Imaging Mass Spectrometry (IMS)** is an innovative technique in the preclinical study that allows for **analysis of the distribution of target molecules in tissues.**
- With IMS, we can detect ion of the target molecules in tissues **without labeling.**

# IMS analysis



*IMS is initiated by mounting a tissue section on a slide. Applying a matrix solution and laser across the surface of tissue for obtaining mass spectra for drug identification.*

# Purpose

- The main objective of this study is to verify the **efficacy and safety** of drugs identification with using **IMS**.
- We selected **olaparib** as the drug being identified by IMS.
- The patients who were administered olaparib were participating in a phase 1 trial (NCT01813474) .
- Our imaging study was performed as a concomitant of this phase 1 trial.

# Method

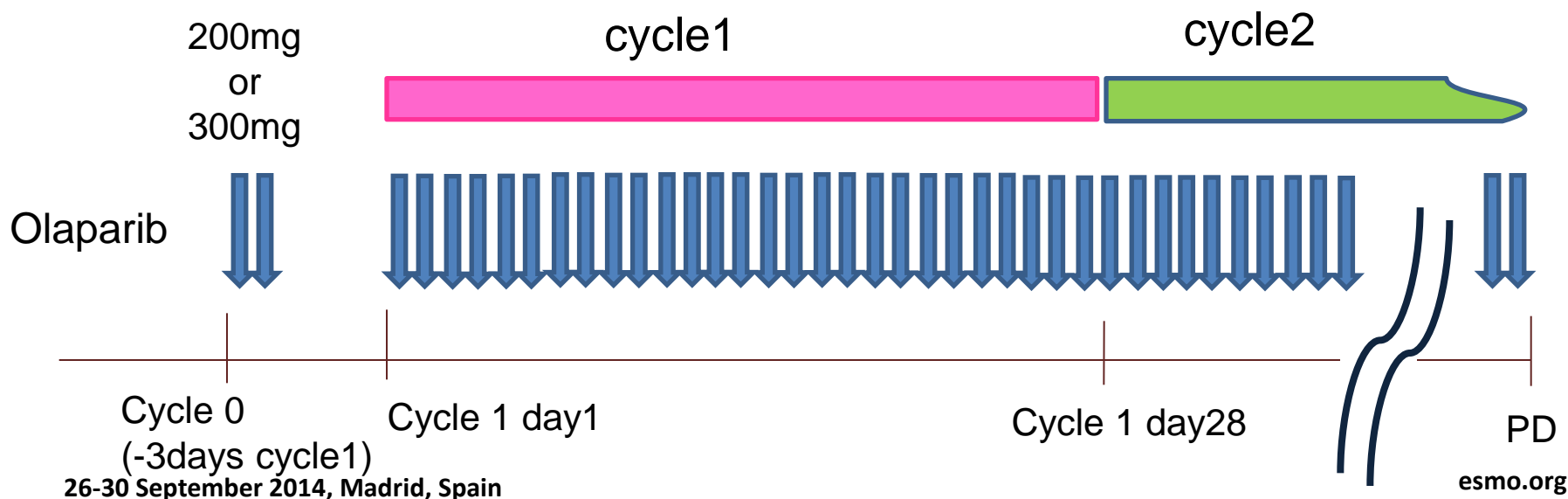
- In this phase 1 trial, patients with solid tumors received the tablet formulation of olaparib in dose escalation.
- I will show the detailed contents about the phase 1 trial design in the next slide.
- We biopsied in consenting patients **during cycle 2 and/or at the time of progression.**
- IMS was performed using an Imaging Mass Microscope (Shimadzu, Japan).
- The concentrations of olaparib in tissues were **validated** by using laser capture microdissection (LCM) and **liquid chromatography tandem mass spectrometry** (LC-MS/MS).

# Trial Design of Olaparib Phase1 trial

- **Olaparib** (AZD2281, KU-0059436) is a potent **inhibitor** of poly (ADP-ribose) polymerase enzyme (**PARP**) .
- The primary objective of this Phase 1 study is to **investigate the safety and tolerability of olaparib** tablet when given orally to Japanese patients with advanced solid malignancies.
- The trial was designed by standard **3+3 cohort** to monitor dose-limiting toxicity and to determine maximum tolerated dose.

# Olaparib cohort

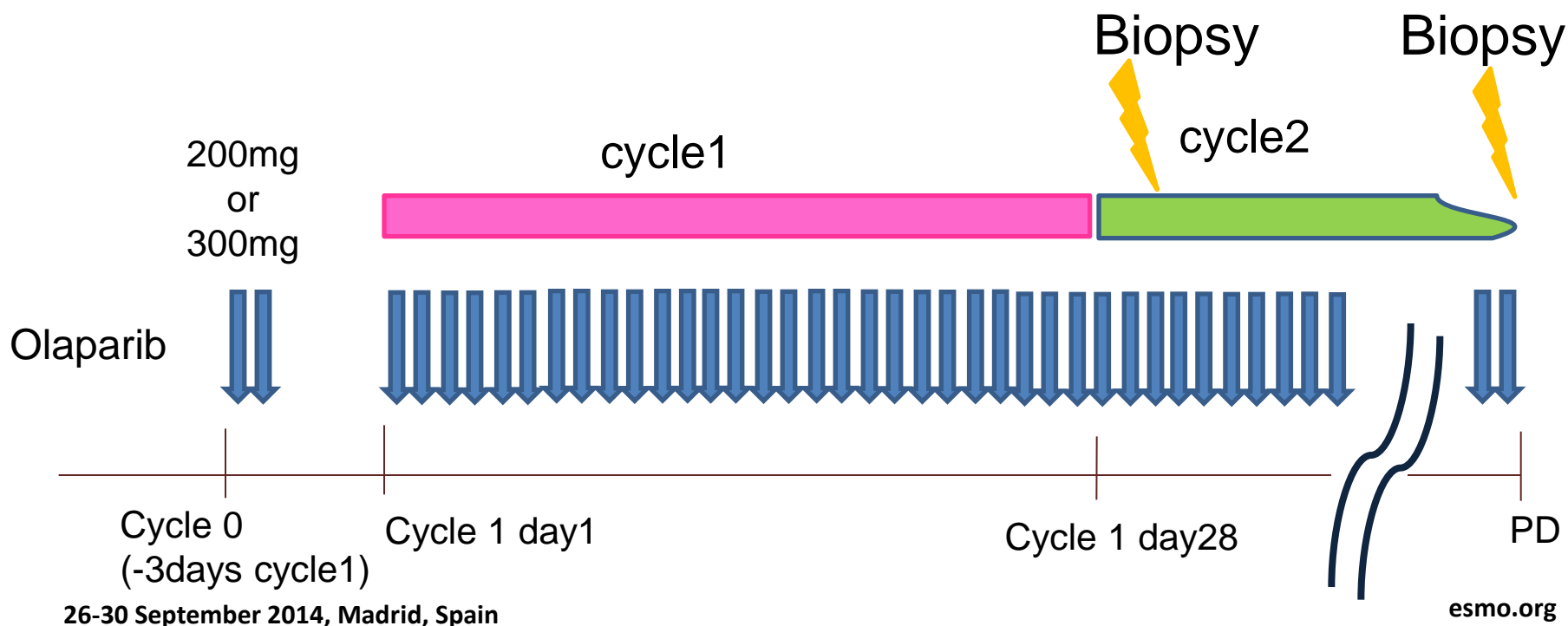
- Cohort 1; 200mg BID
- Cohort 2; 300mg BID
- Cohort 3; expansion cohort(Cohort 2 is tolerable, 12 patients enrolled to evaluate feasibility of 300mg BID )





# Biopsy schedule

The timing of biopsies :  
**during cycle 2 and/or at the time of progression.**



# Patients characteristics of IMS study

No	Age	Disease	BRCA mutation	Dose	Biopsy site	Best response	Timing of biopsy	Sampling time after dosing
1	56	Cervical Cancer	(-)	200mg BID	Lung TBB	SD	C3D13	9hour 10min
2	47	Ovarian Cancer	(-)	300mg BID	Breast CNB	PD	PD(C1)	4hr 15min
3	35	Breast Cancer	(-)	300mg BID	Lymph node CNB	PD	C2D15	5hr 14min
4	59	Breast Cancer	(+)	300mg BID	Breast CNB	PD	PD(C2)	4hr 15min
5	48	Breast Cancer	(-)	300mg BID	Breast CNB	PD	C2D15 PD(C3)	30min 30min
6	56	Peritoneal Cancer	(-)	300mg BID	Liver CNB	PD	C2D15	6hour 40min

TBB: transbronchial biopsy, CNB: core needle biopsy

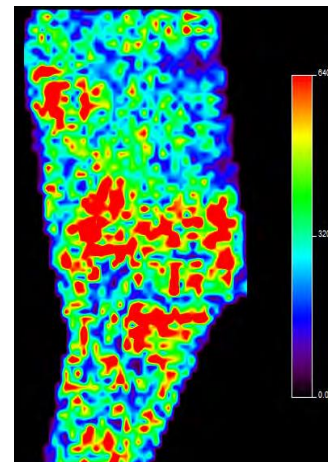
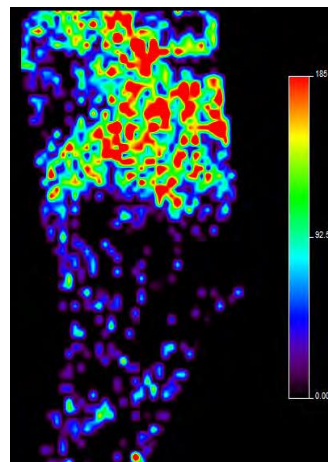
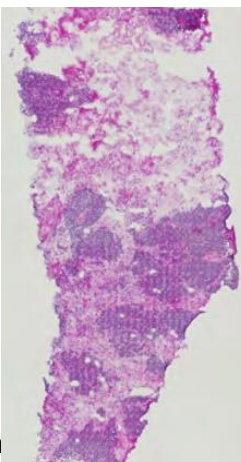
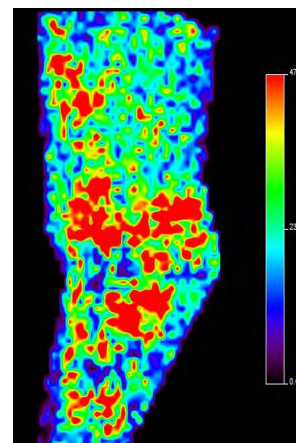
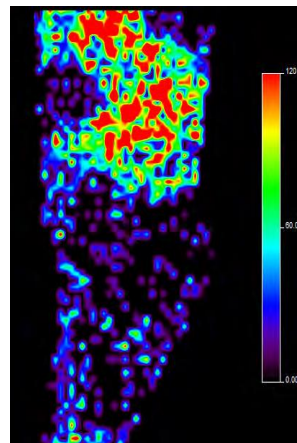
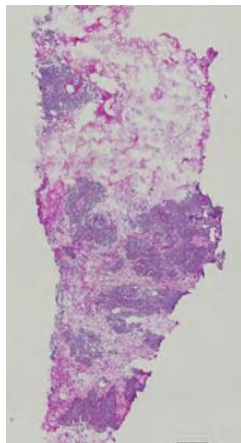
# Result: Image of Olaparib patient No. 2 (47 y/o ovarian cancer patient, breast core needle biopsy)

sample

H&E stained

Olaparib (MS/MS)

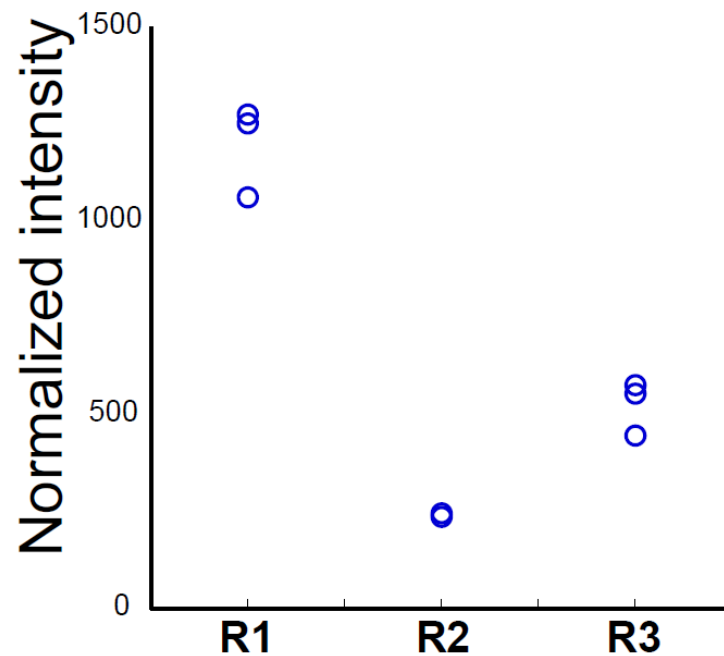
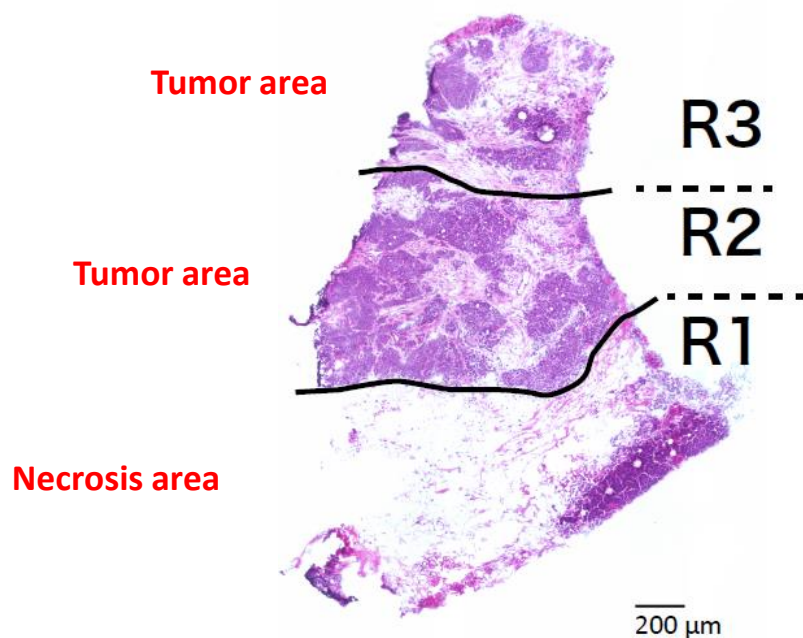
Reference substance



Sample size  
Width 0.5mm  
Length 2 mm

## Result No.2

Administration: 9:30 (May 31, 2013), Sampling: 13:45 (4h 15 min after dosing)



Tissue concentration of olaparib was validated by LC-MS/MS method.

Normalized intensity of olaparib in necrosis area (R1) was higher than that in tumor area (R2+R3) .

# Result

- Imaging signal levels of olaparib correlated well with the concentration of drug in tumor tissues derived, and that are correlated with conventional techniques used in PK studies.
- Olaparib was distributed in the tumor region and the signal level in areas of necrosis was higher than that observed in living cell areas.

# Discussion

- Validation and standardization of IMS would be important to exploit IMS in Proof of Concept study in drug development.
- Further study is needed to explore association between imaging pattern of drug distribution in tumor and clinical response.

# Conclusion

- The use of IMS has allowed tracking of distribution of an unlabeled olaparib in target tissues.
- This technique may also allow further understanding of PK/PD relationships for olaparib when dosed in combination with other compounds in future clinical trials