Targeting TGF-β Signaling in the Tumor Microenvironment as an Effective Therapy in Osteosarcoma

Kristen A. VanHeyst, Sung-Hee Choi, Jay Myers, Suzanne Tomchuck and Alex Y. Huang Division of Pediatric Hematology-Oncology, Department of Pediatrics, CWRU SOM Angie Fowler AYA Cancer Institute, UH Rainbow Babies & Children's Hospital Cleveland, Ohio 44106 *U.S.A.* 



Cleveland | Ohio





# **Disclosures**

- Discussion of investigational drug use
  - •TEW-7197, Vactosertib, MedPacto







# Immunotherapy and Osteosarcoma (OS)

- Promising approach to overcome limitation of conventional treatments
- Achieves good therapeutic effects in other malignancies
- OS has immunosuppressive tumor microenvironment that can be modulated to improve immune responsiveness
  - Challenges to using immunotherapy exist
    - Lack validated biomarkers for predicting responses to immunotherapy
  - Inconsistent clinical efficacy of immunotherapy in OS due to tumor heterogeneity, immune evasion mechanisms, and insufficient immune infiltration

Han Z, Chen G and Wang D (2025) Emerging immunotherapies in osteosarcoma: from checkpoint blockade to cellular therapies. *Front. Immunol.* 16:1579822. doi: 10.3389/fimmu.2025.1579822







# Vactosertib (TEW-7197, MedPacto)

- Small molecule inhibitor against Type 1 TGF-β receptor (ALK 5)
- Orally available
- Transient, low-grade toxicities
- Has 10 times the potency (IC50=11nM) of previous ALK5 inhibitors

# TGF-βR1/ALK 5 Inhibitor





# **Tumor Associated Macrophages**

- Tumor associated macrophages are a dominant immune cell in OS
  - Secrete high levels of immunosuppressive cytokines, including TGF-β
    - Recruits and induces immune-suppressive myeloid and regulatory T cells
    - TGF-β1 signaling pathway in myeloid cells has been found to be required for tumor metastasis





# **Preclinical Data Review**

- Vactosertib inhibits murine osteosarcoma cell growth in vitro and in vivo
- Tumor incidence and volume in mice treated with vactosertib decreased than compared to mice treated with vehicle
- Survival was improved in mice treated with vactosertib compared to mice treated with vehicle
- Vactosertib had efficacy in immune competent syngeneic Balc/C mice starting treatment with vactosertib 4 weeks after tumor inoculation when pulmonary disease was evident





# Targeting TGF-β in the tumor microenvironment of OS may reduce or ameliorate disease

Vactosertib may address unmet clinical need by targeting TGF-β signaling pathway

### FDA's expedite programs

Orphan Drug Designation (08/2021)

Rare Pediatric Drug Designation (09/2022)

Fast Track Designation (01/2023)

Orphan Medical Product (EMA) (07/2023)

### Crucial role of TGF-β in OS

Transforming Growth Factor-β
Signaling Plays a Pivotal Role in
the Interplay Between Osteosarcoma
Cells and Their Microenvironment

Franck Verrecchia\* and Françoise Rédini

Transforming growth factor  $\beta$  signaling in myeloid cells is required for tumor metastasis

Yanli Pang<sup>1,4</sup>, Sudheer Kumar Gara<sup>1</sup>, Bhagelu R. Achyut<sup>1</sup>, Zhaoyang Li<sup>1</sup>, Hannah H. Yan<sup>1</sup>, Chi-Ping Day<sup>1</sup>, Jonathan M. Weiss<sup>2</sup>, Giorgio Trinchieri<sup>2</sup>, John C. Morris<sup>3</sup>, and Ll Yang<sup>1,\*</sup>

<sup>1</sup>Laboratory of Cancer Biology and Genetics, National Cancer Institute, NIH, Bethesda, MD 20892. USA

<sup>2</sup>Cancer and Inflammation Program, National Cancer Institute, NIH, Frederick, MD 21702, USA

<sup>3</sup>Division of Hematology-Oncology, Department of Medicine, University of Cincinnati, Cincinnati, OH 45206, USA

Front Oncol. 2018 Apr 30;8:133.

### TGF-β Signaling in Bone Remodeling and Osteosarcoma Progression

Audrey Lamora, 1,2,3 Julie Talbot, 1,2 Mathilde Mullard, 1,2 Benedicte Brounais-Le Royer, 1,2 Françoise Redini, 1,2 and Franck Verrecchia 1,2,\*

### TGF-β is critical to OS development

- Immune suppressive molecule in the tumor microenvironment
- Increased in serum of patients with OS
- Associated with lung mets







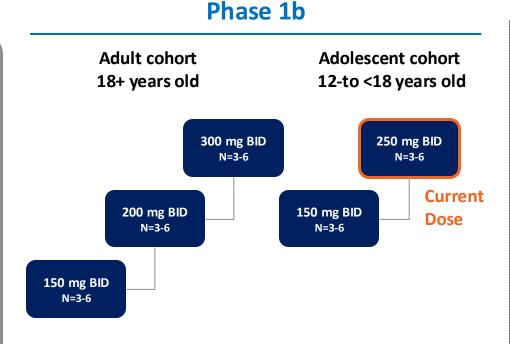


# Study Design for MP-VAC-209 (Phase 1b ongoing, Phase 2)

NCT05588648, Phase 1b is nearing completion

## **Key Eligibility** Criteria • Age ≥12 years • Confirmed histologic verification of Osteosarcoma Progressed, relapsed or became refractory to

conventional therapy



### Phase 2a

### **Adult and Adolescents**

RP2D N = 42

**Total of 42 evaluable patients** including patients in Phase 1 treated at the same dose

### **Endpoints**

- Primary: Safety, Tolerability
- Secondary: OS, ORR, PFS, DOR, TTR, TTP
- Exploratory: Biomarker (c-Myc etc)









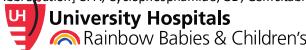
# Individual Subject Data by Prognostic Factors (Phase 1b)

ORR = 36.4% (4/11)

Subject	Sex/Age	Primary	Disease Duration (years)	Prior line	Metastasis	<b>LDH</b> ALP	Tumor Size (mm)	Status	BOR	os	PFS
Adult – Vactosertib 150 mg BID											
108-001	M/35	Femur	15.6	-	Lung, Pleura, Abdomen wall	<b>176</b> 132	110	EOT – PD EOS – Study closing	PD	6.3+	1.6
202-001	M/30	Femur	6.1	6 <sup>th</sup> line: CPA/VP-16	Bone, Lung	<b>378</b> 391	238.6	EOT - Withdrawal EOS - Death	PD	5.4	1.8
202-002	F/31	Femur	3.6	7 <sup>th</sup> line: ICE	Skin, Muscle, H&N, lung, Brain	<b>162</b> 121	64.9	EOT - PD EOS – Withdrawal	PD	4.0+	1.1
Adult – Vact	osertib 200	mg BID									
108-003	M/35	Chest	4.8	-	Lung, Pleura, Liver, Muscle, Bone	<b>366</b> 942	126	EOT - PD EOS — Death	PD	2.4	1.2
201-001	M/26	Humerus	5.6	2 <sup>nd</sup> line: ICE	Muscle, Bone, Pleura	<b>256</b> 125	32.8	Ongoing	PR (-31.1%)	16.6+	13.8+
201-002	F/31	Pelvis	4.5	4 <sup>th</sup> line: GD	Bone	<b>154</b> 65	50	Ongoing	PR (-47.2%)	16.6+	13.8+
Adult – Vactosertib 300 mg BID											
201-003	M/56	Femur	8.0	3 <sup>rd</sup> line: IE	Bone	<b>175</b> 87	41.9	Ongoing	PR (-51.1%)	7.4+	5.5+
201-004	M/40	Pelvis	3.0	3 <sup>rd</sup> line: ICE/GD	Bone, Lung	<b>140</b> 138	94	EOT – Death EOS - Death	-	2.0	2.0
202-003	M/19	Femur	4.1	4 <sup>th</sup> line: Sorafenib	Bone	<b>172</b> 169	109	EOT – PD EOS - Ongoing	PD	1.9+	1.7
Adolescent -	- Vactoserti	b 150 mg Bli									
202-004	F/16	Femur	4.7	11 <sup>th</sup> line: CPA	Bone, Mediastinum, Lung	<b>162</b> 168	241.2	EOT – PD EOS - Ongoing	PD	1.9+	1.8
202-005	F/17	Femur	4.7	4 <sup>th</sup> line: ICE	Bone	<b>103</b> 295	23	Ongoing	PR (-65.2%)	1.0+	TBD

[Abbreviation] CPA, Cyclophosphamide; GD, Gemcitabine + Do

oposide: IF Ifosfamida + Etoposido: VP 16, Etoposide ; UPS, Undifferentiated Pleomorphic Sarcoma







# **Cumulated AE Listing (1/2)**

### Data as of 19 May-2025

Subject	Age Group	Dose	AE Term	Start Date	End Date	Causal Relationship	Action Taken	DLT	SAE	Outcome	Maximum Severity
108-001	Adult	150mg BID	Vomiting	20-Nov-23	25-Nov-23	Not related	Dose not changed	No	No	Recovered/Resolved	GRADE 1
108-001	Adult	150mg BID	Nausea	05-Nov-23	Ongoing	Not related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 1
108-001	Adult	150mg BID	Dyspnea	06-Nov-23	10-Nov-23	Not related	Dose not changed	No	No	Recovered/Resolved	GRADE 1
108-001	Adult	150mg BID	Pain in extremity right shoulder	02-Dec-23	Ongoing	Not related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 2
108-001	Adult	150mg BID	Tumor pain right side abdomen	02-Dec-23	Ongoing	Not related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 2
108-001	Adult	150mg BID	Cough	29-Oct-23	Ongoing	Not related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 2
108-003	Adult	200mg BID	Fatigue	25-Jan-24	Ongoing	Related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 1
108-003	Adult	200mg BID	Anemia	24-Jan-24	17-Mar-24	Related	Dose not changed	No	No	Recovered/Resolved	GRADE 3
108-003	Adult	200mg BID	Spinal cord compression	28-Feb-24	Ongoing	Not related	Drug withdrawn	No	No	Not recovered/Not resolved	GRADE 3
108-003	Adult	200mg BID	Urinary retention	28-Feb-24	Ongoing	Not related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 2
108-003	Adult	200mg BID	Constipation	01-Mar-24	13-Mar-24	Not related	Dose not changed	No	No	Recovered/Resolved	GRADE 2
108-003	Adult	200mg BID	Systemic inflammatory response syndrome	12-Mar-24	Ongoing	Not related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 3
108-003	Adult	200mg BID	Scrotal swelling	12-Mar-24	Ongoing	Not related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 2







# **Cumulated AE Listing (2/2)**

### Data as of 19 May-2025

Subject	Age Group	Dose	AE Term	Start Date	End Date	Causal Relationship	Action Taken	DLT	SAE	Outcome	Maximum Severity
201-002	Adult	200mg BID	Enterocolitis	10-Jun-24	14-Jun-24	Not related	Dose not Changed	No	Yes	Recovered/Resolved	GRADE 3
201-004	Adult	300mg BID	Tumor hemorrhage	21-Nov-24	Ongoing	Not related	Dose not Changed	No	Yes	Not Recovered/Not Resolved	GRADE 3
202-001	Adult	150mg BID	Anemia	14-Nov-23	11-Jan-24	Related	Dose not changed	No	No	Recovered/Resolved	GRADE 3
202-001	Adult	150mg BID	Hypophosphatemia	23-Oct-23	Ongoing	Not related	Dose not changed	No	No	Recovering/Resolving	GRADE 2
202-001	Adult	150mg BID	Urinary tract infection	23-Oct-23	28-Nov-23	Not related	Dose not changed	No	No	Recovered/Resolved	GRADE 3
202-002	Adult	150mg BID	Dizziness	28-Oct-23	28-Oct-23	Not related	Not Applicable	No	No	Recovered/Resolved	GRADE 1
202-002	Adult	150mg BID	Fatigue	04-Nov-23	Ongoing	Related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 2
202-002	Adult	150mg BID	Vomiting	04-Nov-23	Ongoing	Related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 1
202-002	Adult	150mg BID	Nausea	04-Nov-23	Ongoing	Related	Dose not changed	No	No	Not recovered/Not resolved	GRADE 2
202-002	Adult	150mg BID	Headache	28-Oct-23	Ongoing	Related	Not Applicable	No	No	Not recovered/Not resolved	GRADE 2
202-003	Adult	300mg BID	Fever	08-Nov-24	11-Nov-24	Related	Dose not changed	No	Yes	Recovered/Resolved	GRADE 3
202-004	Adolescent	150mg BID	Hypotension	18-Feb-25	18-Feb-25	Not related	Dose not changed	No	No	Recovered/Resolved	GRADE 1
202-005	Adolescent	150mg BID	Maculopapular rash	22-Feb-25	22-Feb-25	Related	Dose not changed	No	No	Recovered/Resolved	GRADE 1

[Note] No DLT observed. No significant risk observed.



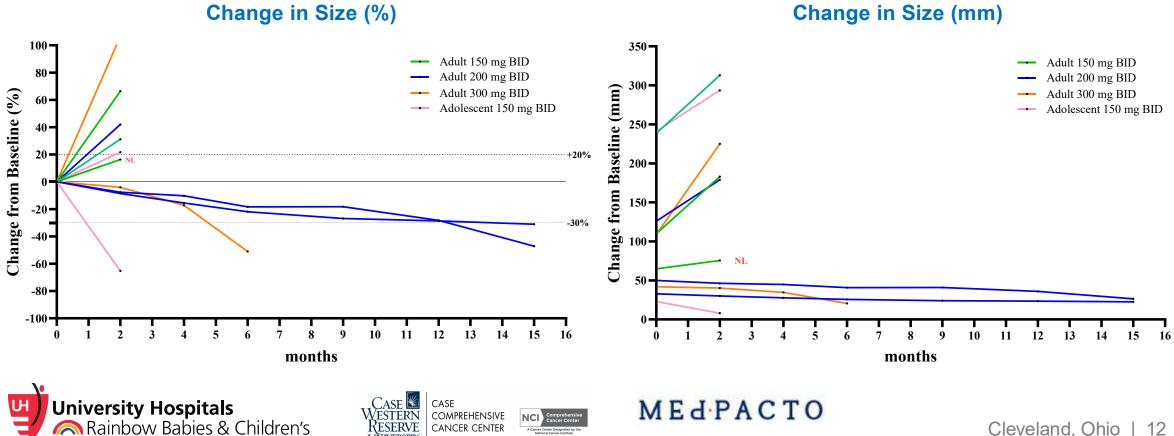






# Change from Baseline in Tumor Burden (Phase 1b)

Vactosertib thus far may be effective in patients with smaller tumors



# Rationale for a Phase 2 maintenance clinical trial

- Risk of relapse and death for osteosarcoma patients with metastatic or relapsed disease having achieved remission is still unacceptably high
- Vactosertib
  - Oral agent
  - Tolerated well, which makes it ideal for a maintenance regimen
- Patients with minimal residual disease may benefit most

### **Risk Factor (≥2 high-risk factors)**

, ,		
Metastatic at diagnosis (M1a)	HR 2.34 (95% CI 1.95 to 2.81)	Smeland et al., 2019 (EURAMOS-1)
<90% necrosis	HR 2.13 (95% CI 1.76 to 2.58)	Smeland et al., 2019 (EURAMOS-1)
1) Primary tumor site (Axial)	HR 1.29 (95% CI 0.86 to 1.95)	Smeland et al., 2019 (EURAMOS-1)
2) ≥18 age	HR 1.53 (95% CI 1.17 to 1.99)	Smeland et al., 2019 (EURAMOS-1)
3) 1 <sup>st</sup> relapse <18 months	RR 1.65 (95% CI 1.23 to 2.20)	Kempf-Bielack et al., J Clin Oncol. 2005
[Note] Tumor size, AJCC 8 <sup>th</sup> T3	not included, Zhang et al., BMC Cancer 2023	





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MEdPACTO





# For Questions or Inquiries about the Clinical Trial Contact:

Kristen.VanHeyst@UHhospitals.org PHOCTU2@UHhospitals.org





