

# **Clinical Trials Program**

Phase I study of therapy for acute myelogenous leukemia (AML) using autologous AML cells engineered to express IL-12

April 1, 2016 to March 31, 2021 **Highlights** • This therapeutic approach has the potential to dramatically improve care for patients \$373,980 with relapsed AML from BioCanRx through better outcomes and highly reduced apeutics toxicity risk, compared to new cases of this cancer in 2010 current treatments. **Acute** This approach overcomes cancers myelogenous leukemia (AML) many of the challenges \$802,958 associated with current \$10,000 treatment using matched donor bone marrow The systemic nature of deaths from this this therapy can eradicate KREMBIL FOUNDATION \$300,000 widespread disease. cancer in 2011 This approach can AML Cells result in long-term immunological memory cure: blood cancer that is trained to expressing IL-12 recognize and attack cancer stem cells, by using a patient's own cancer cells as a vaccine platform.

### **About the project**

The immune system has the capacity to kill leukemia cells if properly instructed to do so. Some of the key instructions come in the form of soluble proteins that, if present in the right amounts, help immune system cells recognize leukemia cells and become activated to kill them.

The project team has previously shown that leukemia cells can be modified to secrete one of these proteins, called Interleukin 12, or IL-12. In experimental systems the leukemia cells secreting IL-12 stimulated a robust immune response that, once initiated, went on to kill all the residual leukemia cells even those not secreting IL-12. Acute myeloid leukemia (AML) is a life-threating disease for which, in many cases, there is no curative treatment. This project will test the safety of infusing 10 to 12 patients with some of their own AML cells that have been engineered to secrete IL-12.

The clinical trial will determine if an immune response has been initiated in both the patient's blood and bone marrow as treatment proceeds. It will also monitor the treatment's effect on the level of disease and follow each patient for two years.



## **Clinical trial** site and investigators

#### **Trial sponsor**

**Princess Margaret Cancer** Centre, University Health Network

#### **Montreal**

Hôpital Maisonneuve-Rosemont, Université de Montréal

Clinical investigator

Dr. Denis-Claude Roy

#### **Ottawa**

The Ottawa Hospital Research Institute

Clinical investigator

Dr. Natasha Kekre

#### **Toronto**

Princess Margaret Cancer Centre, University Health Network

#### **Clinical investigators**

Dr. Mark Minden

Dr. Anna Porwit

Scientific investigators

Dr. Christopher Page Dr. Jeffrey Medin

**BioCanRx** \$373.980 approved on

Sept. 29, 2015

### **Partner contributions**

**Cure: Blood Cancer** \$10,000

\$300,000

**Princess Margaret Cancer Centre Foundation** & Krembil Foundation \$802,958

April 1, 2016

Trial opens

- Protocol development, REB and Health Canada approvals
- · Patient screening
  - Enrol and treat patients 5 and 6 at dose level 3
  - Complete analysis of patients 3 and 4
  - Enrol and treat patients 9 and 10 at dose level 5
  - Complete analysis of patients 7 and 8

- Enrol and treat patients 1 and 2 at dose level 1
- Enrol and treat patients 3 and 4 at dose level 2
- Complete analysis of of patients 1 and 2
- Enrol and treat patients 7 and 8 at dose level 4
- Complete analysis of patients 5 and 6
- Enrol and treat patients 11 and 12 at dose level 6
- Complete analysis of patients 9 and 10
- Complete follow-up and evaluation of:
  - primary safety objectives
  - secondary endpoint of response to treatment

