# LTX-315 (Oncopore<sup>™</sup>) as an oncolytic peptide immunotherapy for the treatment of melanoma

KETIL ANDRÉ CAMILIO<sup>1,2</sup>, LIV-MARIE EIKE<sup>2</sup>, ØYSTEIN REKDAL<sup>1,2</sup> AND BALDUR SVEINBJØRNSSON<sup>2</sup> 1. Lytix Biopharma AS, P.O. Box 6447, NO-9294 Tromsø, Norway 2. Department of Medical Biology, Faculty of Health Sciences, University of Tromsø, Tromsø, Norway



#### Background

Malignant melanoma, which develops from a neoplastic transformation of melanocytes, is the most aggressive form of skin cancer. With a worldwide increasing incidence of malignant melanoma, there is a continued need for new and improved treatment.

LTX-315 (Oncopore<sup>™</sup>) is a novel cationic oncolytic peptide designed for the treatment of solid tumors. By adopting an amphipathic helical structure, LTX-315 interacts electrostatically with the anionic components of negatively charged cancer cell membranes. LTX-315 induces a destabilization and disruption of the cancer cell membrane, causing cellular lysis and a subsequent release of endogenous cellular content.



## Aim

Investigate the anticancer effects of LTX-315 against malignant melanoma following intratumoral administration. We also wanted to elucidate whether intratumoral treatment with LTX-315 resulted in an activation of the immune system and tumor-specific immune responses.

#### Structural representations of LTX-315

Chemical structure of LTX-315 (top) and helical wheel representations as well as a secondary structure (bottom). Cationic residues are in blue and aromatic residues in grey.

### Results

a)

**Fig. 1** Malignant melanoma cells are more sensitive to LTX-315 compared to non-malignant cells and display rapid kill kinetics compared to conventional chemotherapeutics

Cell line	LTX-315 IC <sub>50</sub> $\pm$ SD ( $\mu$ M)	LTX-328 IC <sub>50</sub> $\pm$ SD ( $\mu$ M)
B16F1	$13.3 \pm 0.4$	>350
A375	$12.7 \pm 2.7$	
Fem-X	$15.3 \pm 2.1$	
PCS-200-013	$19.0 \pm 5.7$	
MRC-5	$25.8 \pm 2.0$	
HIVEC C	$27.6 \pm 3.3$	

## **Fig. 4** LTX-315 induces complete regression of palpable B16F1 tumors following intratumoral administration



Palpable B16 melanomas were injected with sterile 0.9% NaCl (vehicle controls) (**a**), with 1 mg LTX-328 (**b**), or with 1 mg LTX-315 (**c**) once per day on day 12, 13 and 14 after tumor challenge. The survival curves are represented in (**d**) (p = 0.0005).

#### **Fig. 7** A proposed mechanism of action model for intratumoral treatment with LTX-315





*In vitro* cytotoxicity of LTX-315 and LTX-328 against cancer cell lines and normal cell lines **(a)**. *In vitro* cytotoxicity data demonstrating IC<sub>50</sub> values of LTX-315 (*red line*) and three different chemotherapeutic drugs against B16F1 (murine) and A375 (human) melanoma cells **(b)**.

## **Fig. 2** B16F1 melanoma cells treated with LTX-315 release ATP and High Mobility Group Box-1 (HMGB1) *in vitro*



(a) B16F1 melanoma cells treated with 35  $\mu$ M and analyzed for the release of ATP. (b) B16F1 melanoma cells treated with 35  $\mu$ M of either LTX-315 (*top*) or LTX-328 (*bottom*) for selected time points (5-60 min). The HMGB1 protein is extracellularly released and translocate from the lysate (L) to the supernatant (S) following treatment with LTX-315.



**Fig. 5** LTX-315-treatment of B16 melanomas induces systemic protective immune responses and inhibits lung tumor foci formation in a B16 metastasis model



Tumor growth in non-treated control animals (a) was compared to animals previously cured by LTX-315 treatment (b and d). Animals were re-challenged intradermally with  $5 \times 10^4$  viable B16F1 cells contra-lateral to the first tumor site (b) or intravenously with  $2 \times 10^5$  viable B16F1 cells (d). The survival curves of animals re-challenged intradermally is represented in (c) (p < 0.0001). A digital image illustrates representative lungs from the different groups re-challenged intravenously (e). The tumor foci of animals previously cured by LTX-315 were highly infiltrated by CD3<sup>+</sup> T cells compared to control animals (f).

## **Fig. 6** LTX-315 is a synergistic combination therapy to immune checkpoint inhibitors

### Conclusions

- LTX-315 induced complete regression of syngeneic B16 melanomas
- Intratumoral treatment with LTX-315 induced an inflammatory response and a subsequent infiltration of T cells into the tumor parenchyma
- Intratumoral treatment with LTX-315 provided local tumor control followed by systemic protective immune responses and inhibition of metastasis, and has thus potential as a novel immunotherapeutic agent
- LTX-315 shows synergistic anticancer effects when combined with conventional anticancer therapies such as immune checkpoint

#### Fig. 3 LTX-315 induces disintegration of mitochondria



A375 cells were labeled with Mitotracker (Red) and nucleus stained with (DAPI) (left). Treatment with LTX-315 (6 μM) caused disintegration of mitochondria (right).



Source: Laurence Zitvogel, Institut de cancerologie Gustave Roussy

inhibitors

- A clinical phase I study investigating the safety and efficacy of LTX-315 has been done and a Phase I/IIa study is ongoing in Europe (ClinicalTrials.gov NCT01986426)
- In the first study, tumour infiltrating lymphocytes and tumour regression were observed in some patients and main safety issues were primarily dose-related flushing and transient hypotension

#### REFERENCES

1. Camilio, K. A., et al. (2014). "Complete regression and systemic protective immune responses obtained in B16 melanomas after treatment with LTX-315." Cancer Immunology, Immunotherapy **63**(6): 601-613.

2. Camilio, K. A., et al. (2014). "LTX-315 (Oncopore<sup>™</sup>): A short synthetic anticancer peptide and novel immunotherapeutic agent." Oncoimmunology **3**: e29181.



#### Lytix Biopharma AS | P.O. Box 6447 | NO-9294 Tromsø, Norway | E-mail: post@lytixbiopharma.com | Phone: +47 77 67 55 00 | Fax: +47 77 67 55 01