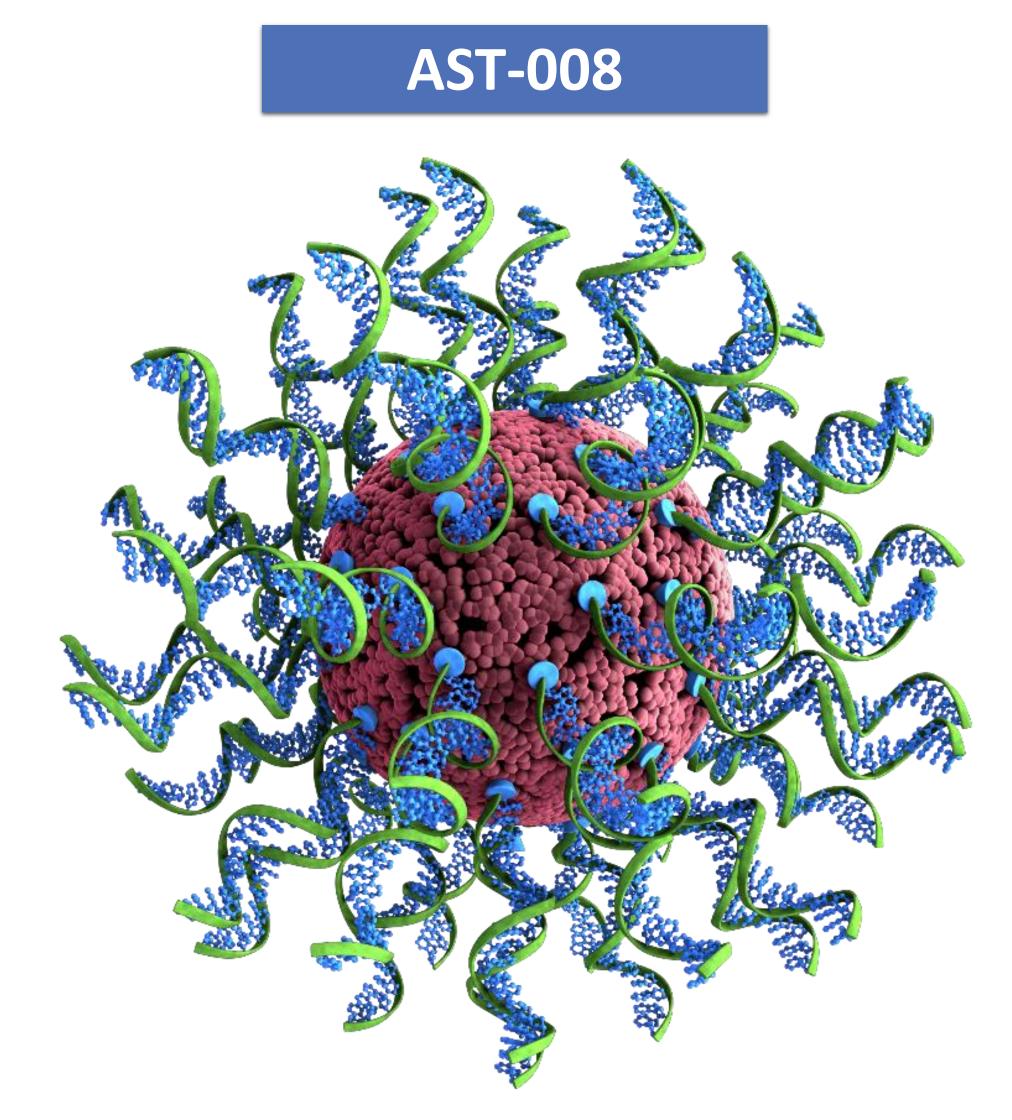
AST-008: A Novel Approach to TLR9 Agonism with PD-1 Blockade for Anti-PD-1 Refractory Merkel Cell Carcinoma (MCC) and Cutaneous Squamous Cell Carcinoma (CSCC)

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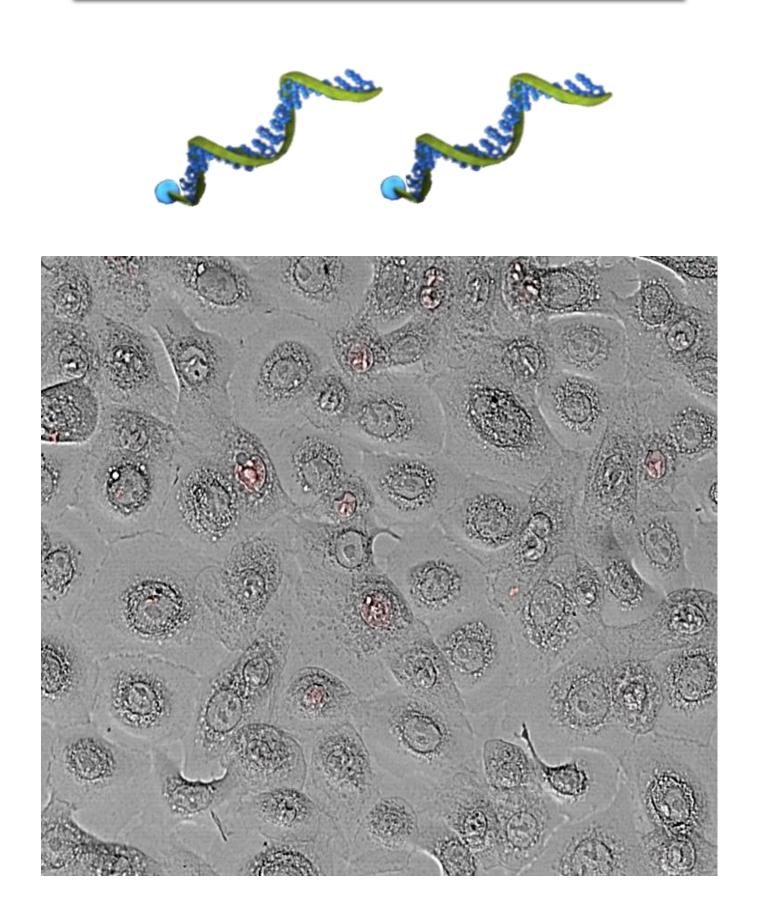
BACKGROUND

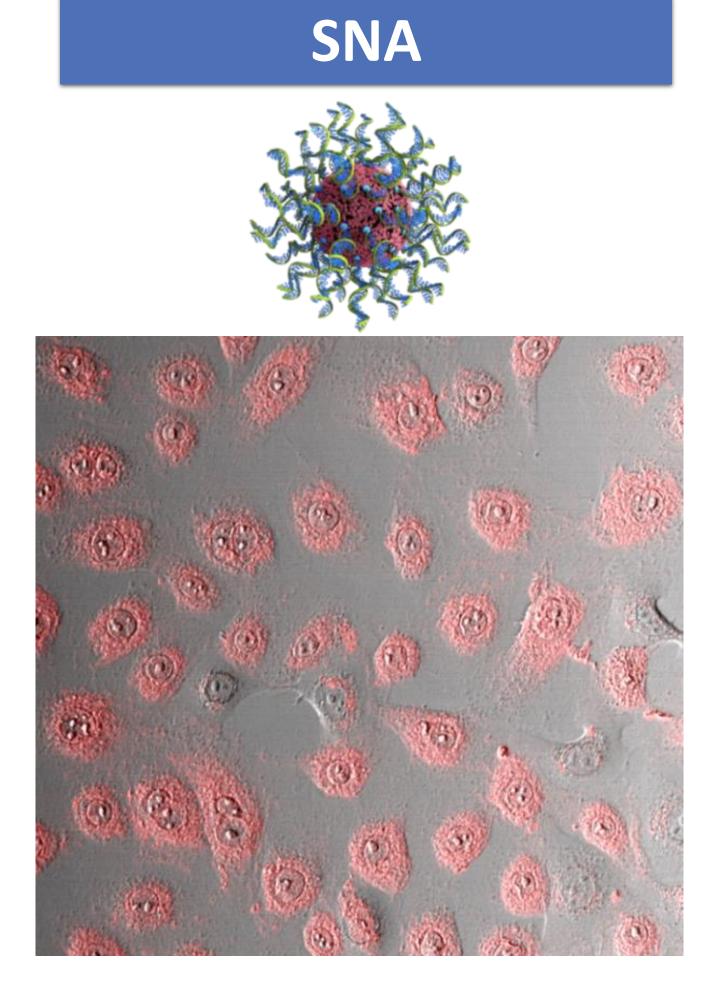
AST-008 is a toll-like receptor 9 (TLR9) agonist in a spherical nucleic acid (SNA) format with potent immune-stimulatory properties



SNAs are dense, radial arrangements of nucleic acids that have increased cellular uptake (below) and an optimal presentation of the oligonucleotides for TLR9 agonism vs free oligonucleotides

Free Oligonucleotide





Open label, multicenter phase 1b/2 dose escalation/expansion design study in progress (NCT03684785)

Phase 2s: Intratumoral (IT) AST-008 plus pembrolizumab or cemiplimab for PD-(L)1 resistant MCC and PD-1 resistant CSCC, respectively. Phase 1b enrolled all solid tumors.

Key study design features: Safety

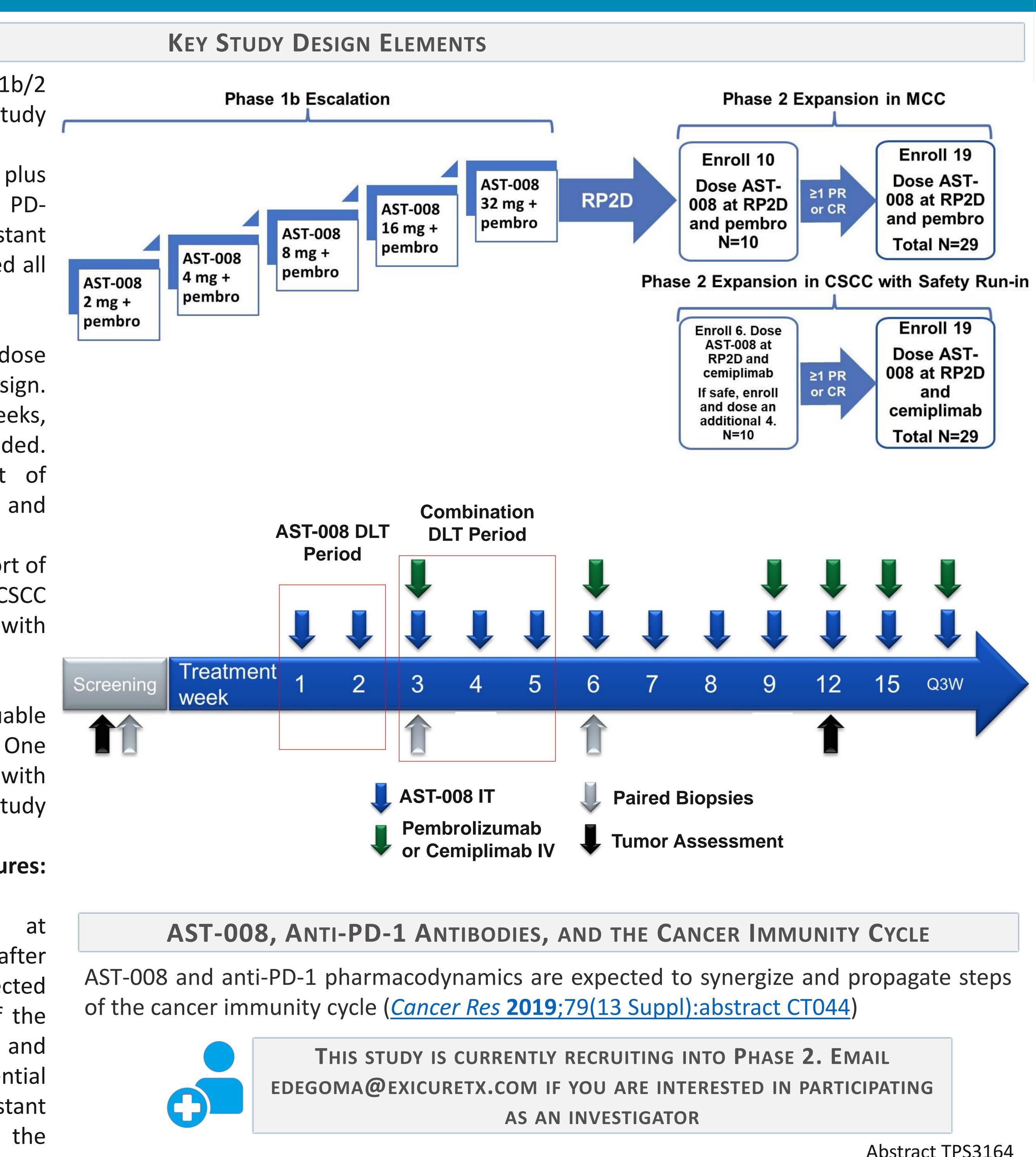
- Dose escalation used a double dose limiting toxicity period (DLT) design. AST-008 dosed IT alone for 2 weeks, then the anti-PD-1 antibody is added. Efficient differential assessment of safety and tolerability of AST-008 and the combination
- FDA allowed dose expansion cohort of AST-008 plus cemiplimab in CSCC after performing dose escalation with AST-008 plus pembrolizumab

Key study design features: Efficacy

more RECIST 1.1-evaluable or lesions required for enrollment. One lesion is to remain uninjected with AST-008 over the course of the study to observe abscopal effects

features: design Key study **Pharmacodynamics**

 Paired biopsies taken at serial baseline, after AST-008, and after combination. One lesion is injected with AST-008 over the course of the study, one is not (termed target and witness lesions). Enables differential assessment of and distant local **AST-008** effects and ot combination



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