

RANK PATHWAY INHIBITORS FOR BREAST CANCER PREVENTION AND TREATMENT

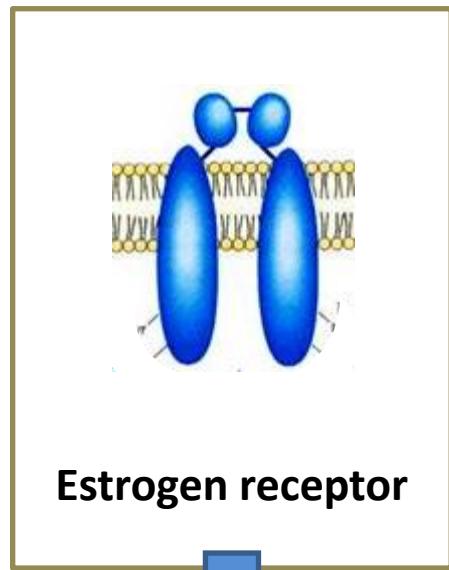
Eva Gonzalez Suarez, PhD

Head of the Transformation and Metastasis group

CNIO (Madrid)/ IDIBELL (Barcelona)

Spain

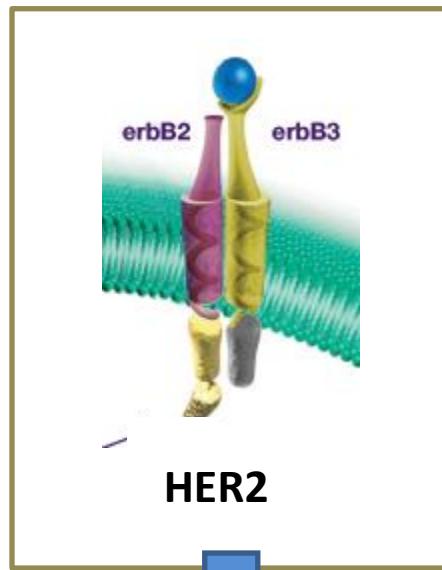
Clinically relevant factors in breast cancer



Luminal.
60% of the cases



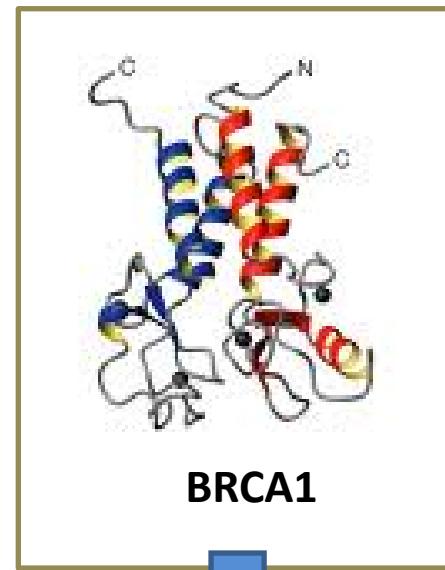
Aromatase inhibitors.



30% of the cases.
Homodimerization and
ligand-independent
activation.
Cell transformation.



Trastuzumab



High-penetrance gene
Decrease in sporadic tumors.
Genomic stability.
Mutations induce breast and
ovarian cancer.

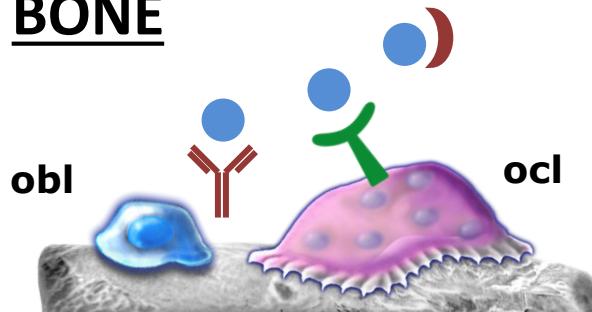


PARP inhibitors

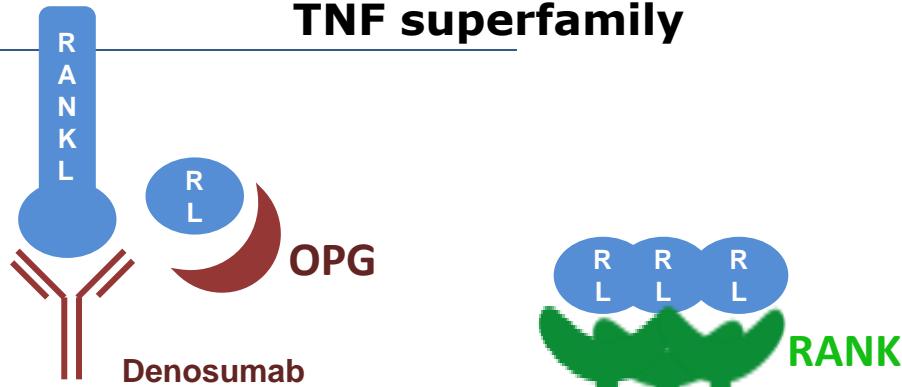
RANK-RANKL pathway inhibition: a promising novel strategy for breast cancer prevention and treatment



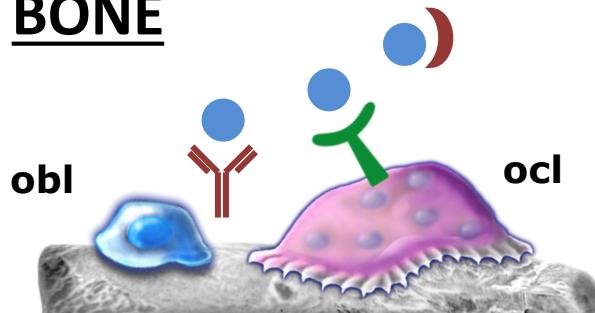
BONE



TNF superfamily



BONE



**RANKL inhibitor:
DENOSUMAB
osteoporosis,
bone metastasis**

1 x 120 mg Single Use Vial
NDC 55513-730-01

AMGEN

XGEVA™
(denosumab)

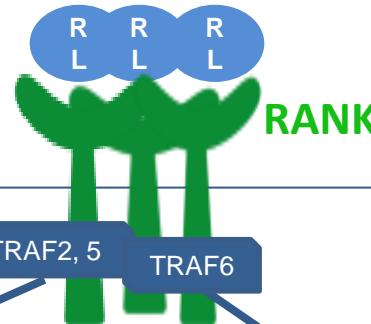
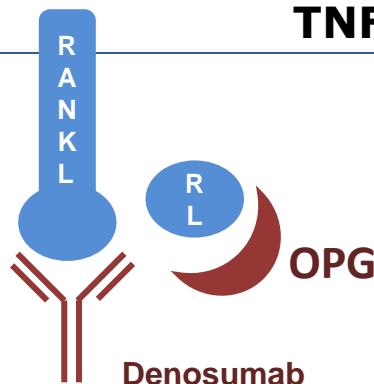
Each vial contains: 120 mg of denosumab,
18 mM acetate, sodium hydroxide to
pH of 5.2, 4.6% sorbitol, Water for
Injection (USP).

Rx Only

See Package Insert for Full Prescribing and
Manufacturing Information

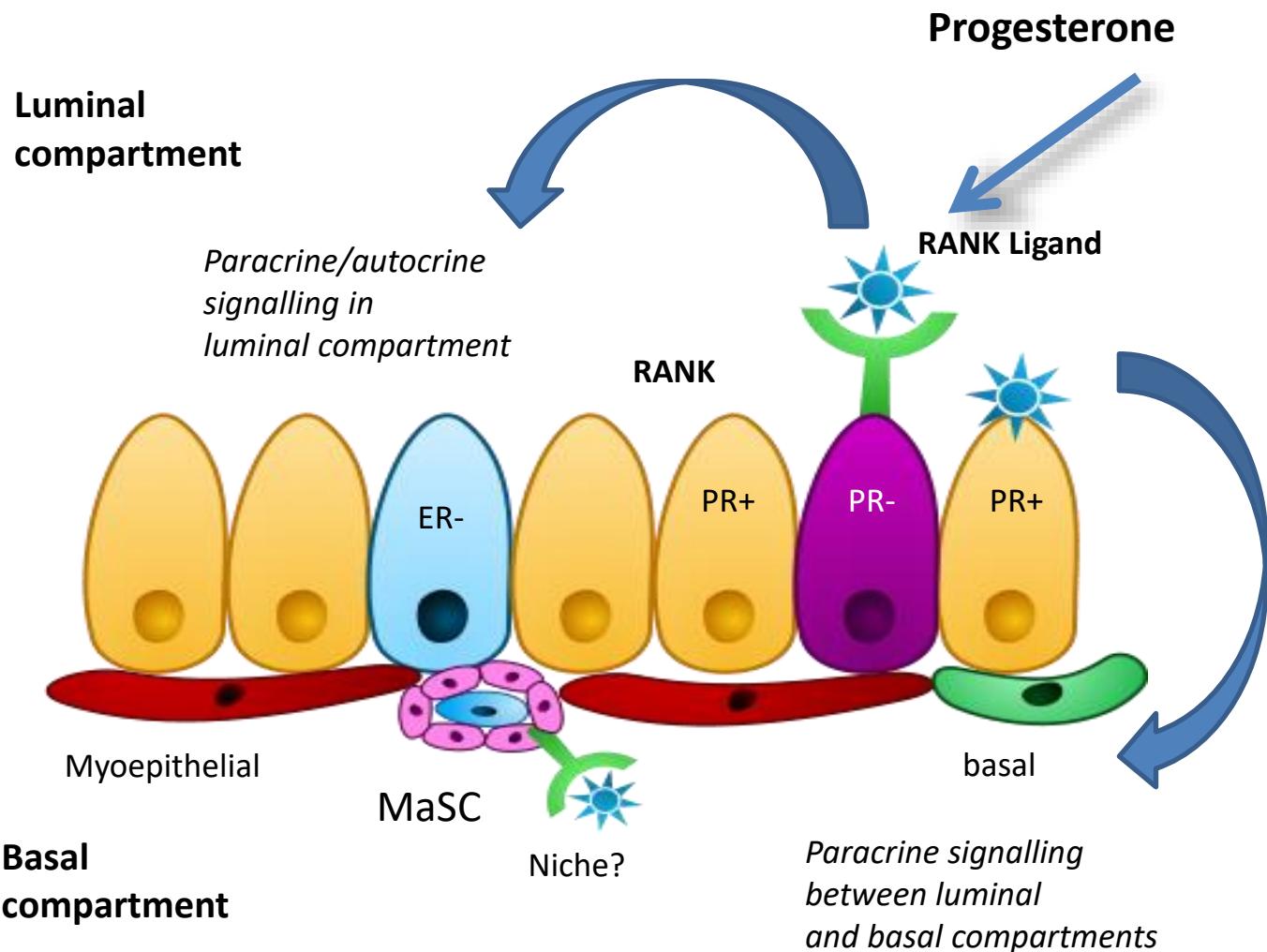


TNF superfamily



MAPK
JNK p38 ERK

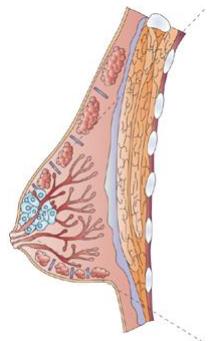
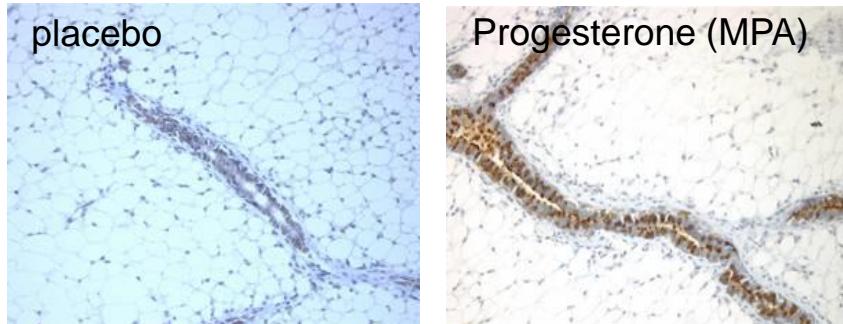
RANKL IS AS A PARACRINE MEDIATOR OF PROGESTERONE IN THE MAMMARY GLAND



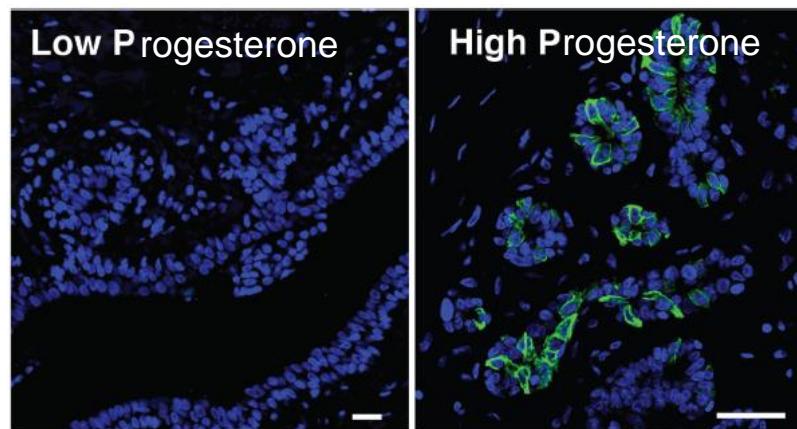
Progesterone induces RANKL expression in mouse and human mammary epithelia



RANKL



RANKL



RANK pathway is the main mediator of the pro-tumorigenic role of progesterone in the mammary gland

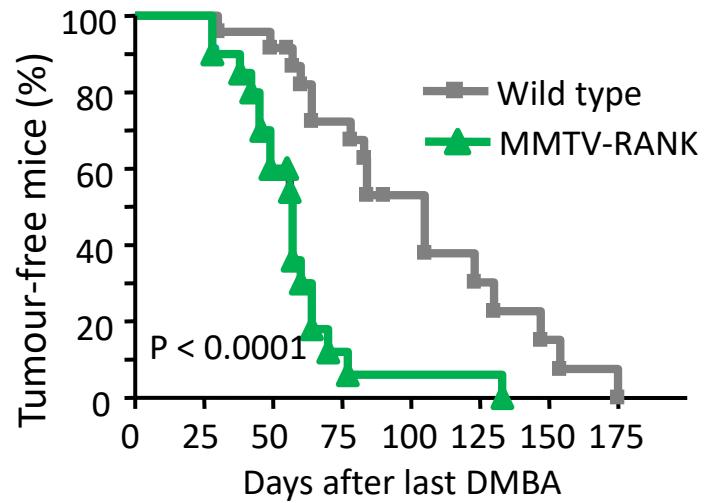
GOF



RANK $^{tg/+}$



DECREASED
TUMOR LATENCY
INCREASED
INCIDENCE



RANK pathway is the main mediator of the pro-tumorigenic role of progesterone in the mammary gland

GOF



RANK $^{tg/+}$

MPA+
DMBA

DECREASED
TUMOR LATENCY
INCREASED
INCIDENCE

**RANK PROMOTES MAMMARY
TUMORIGENESIS DRIVEN BY
PROGESTERONE**

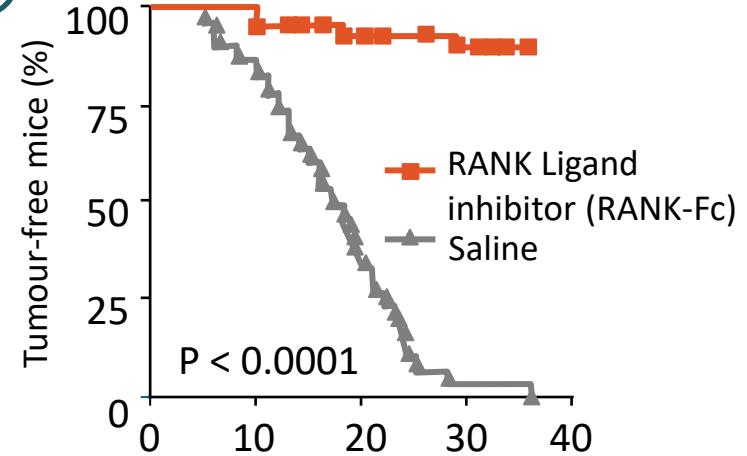
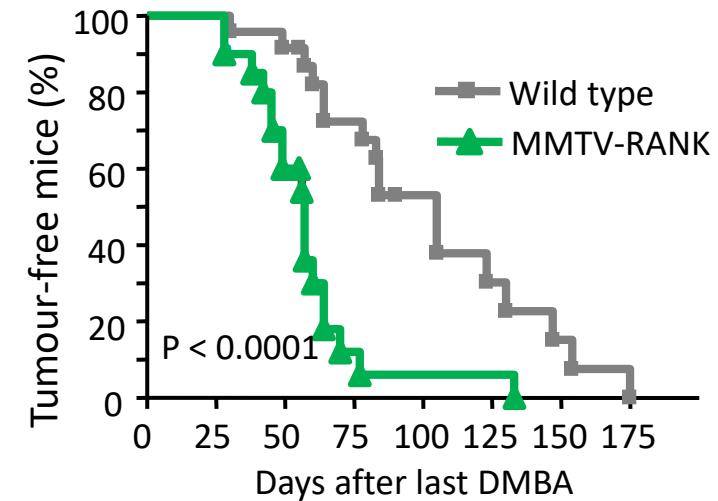
LOF



WT

MPA+
DMBA

NO TUMOR
FORMATION



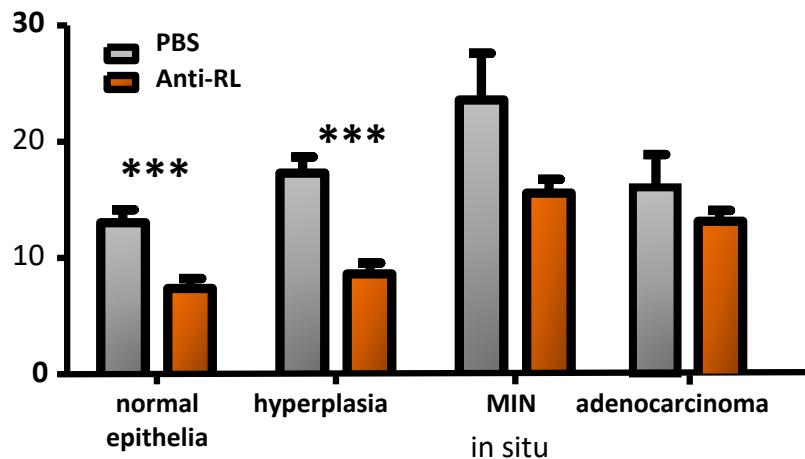
DMBA, 2,4-dimethoxybenzaldehyde (carcinogen); MPA, medroxyprogesterone acetate (progesterone derivative).

Inhibition of RANKL decreases proliferation and survival in mammary preneoplastic lesions



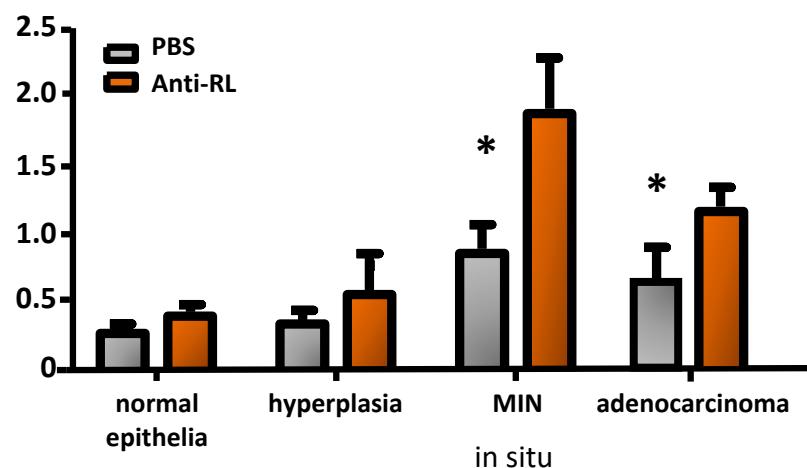
Proliferation

% BrdU positive nuclei



Apoptosis

% cleaved caspase 3 positive nuclei

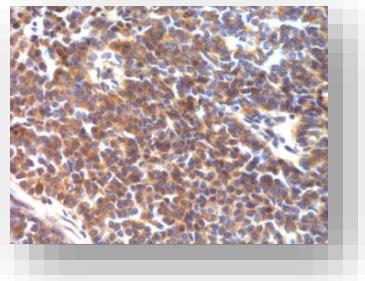


MIN: mammary intraepithelial neoplasia

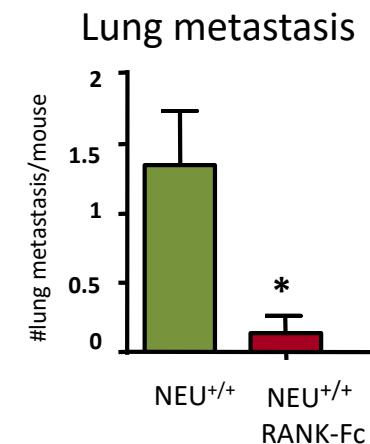
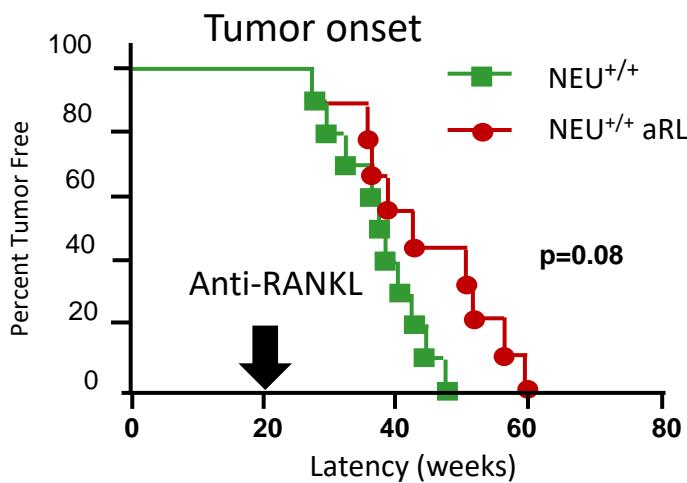
Preventive inhibition of RANK signaling decreases mammary tumor incidence and lung metastasis in oncogene driven models

LOF: pharmacologic
anti-RANKL

RANK



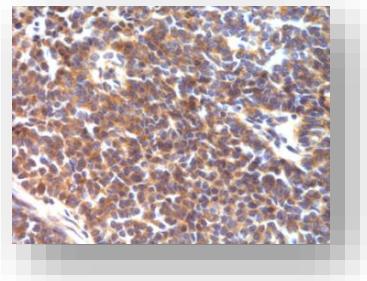
MMTV-Neu



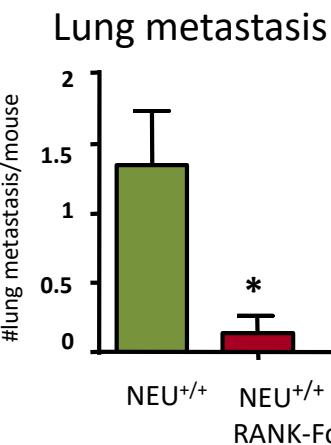
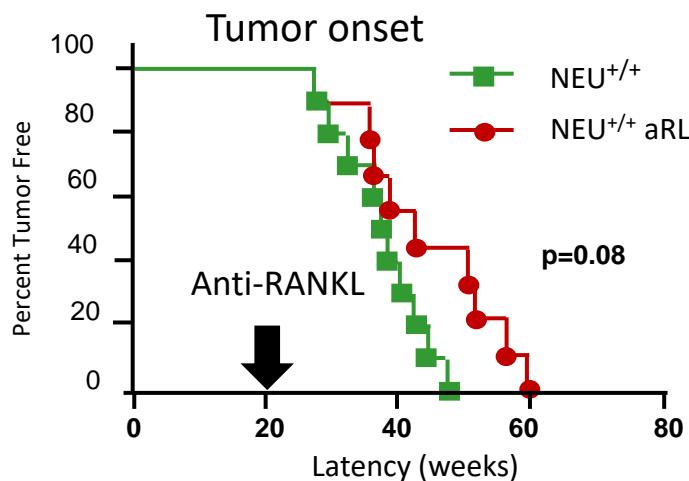
Preventive inhibition of RANK signaling decreases mammary tumor incidence and lung metastasis

LOF: pharmacologic anti-RANKL

RANK

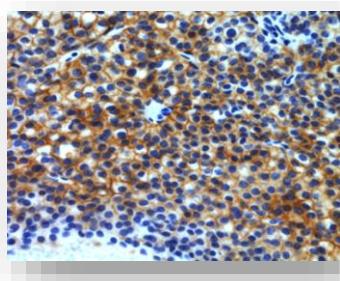


MMTV-Neu

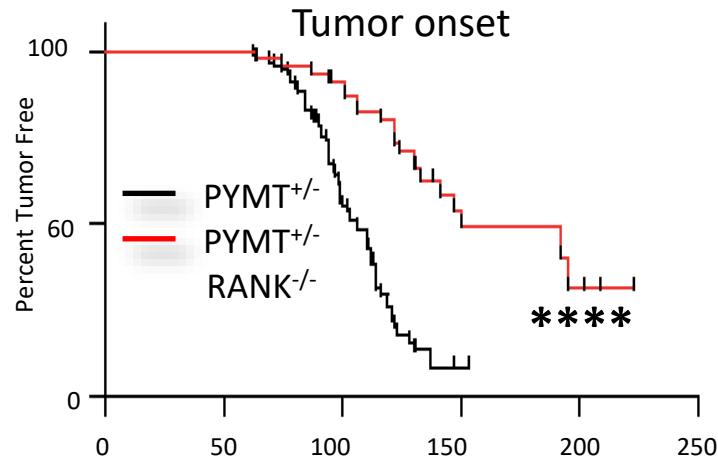


LOF: genetic RANK $^{-/-}$

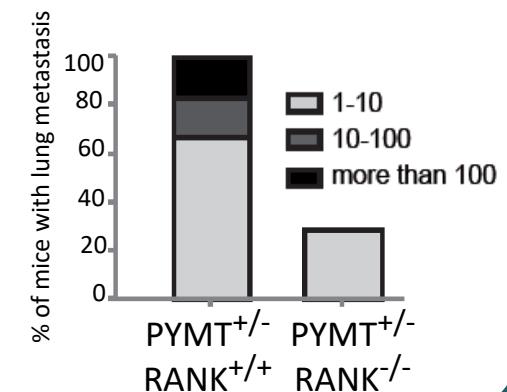
RANK



MMTV-PyMT



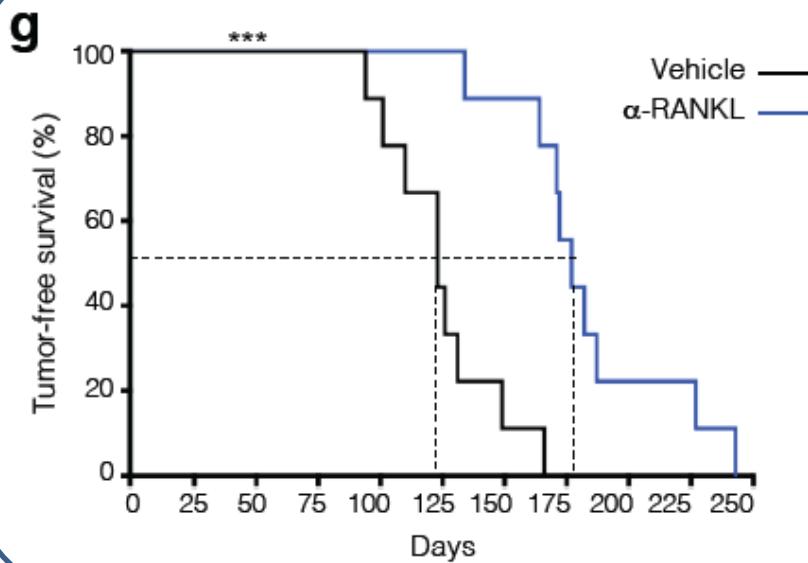
Lung metastasis



Preventive inhibition of RANK signaling delays mammary tumor onset and mediates mammary epithelial proliferation in *Brca1* mutant models

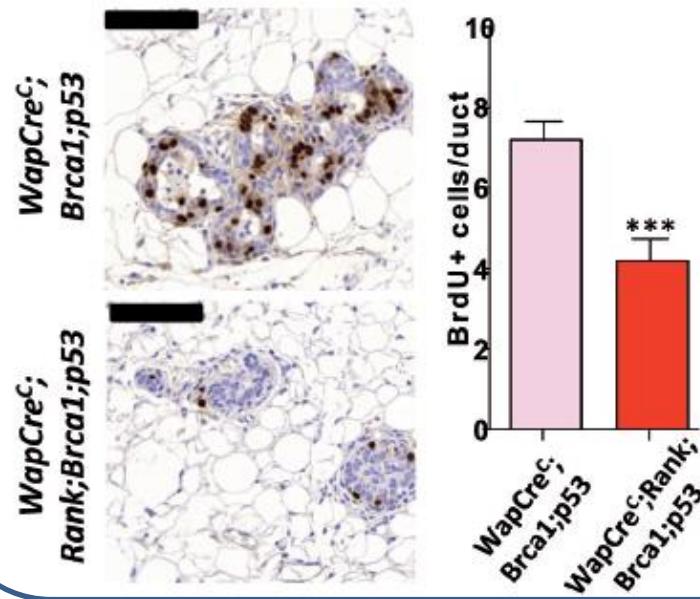


Tumor onset



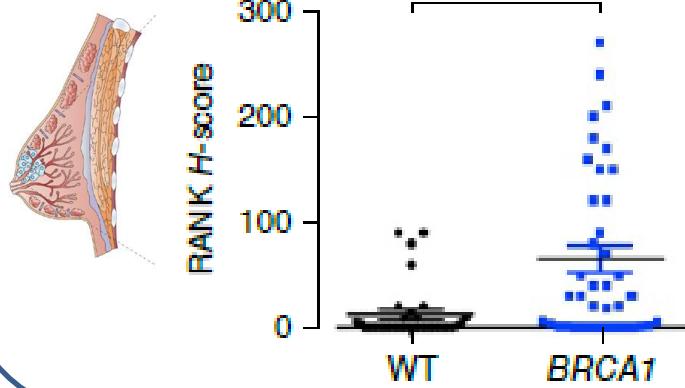
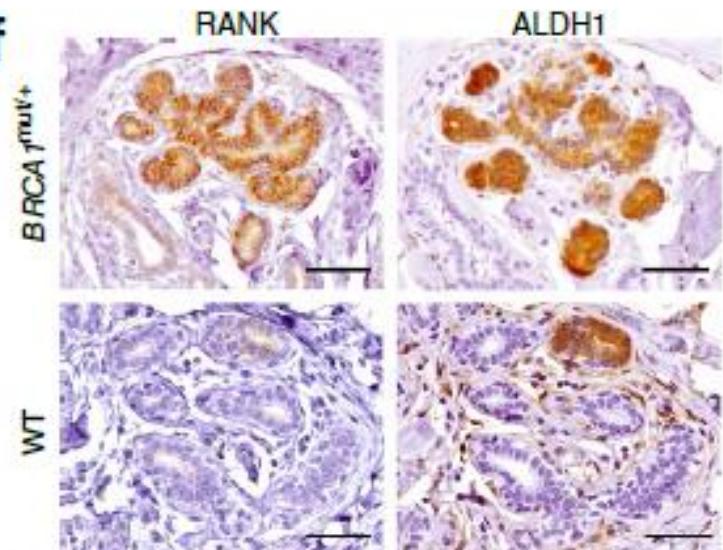
MMTV-cre *BRCA1* floxed *p53*^{+/−}

Proliferation



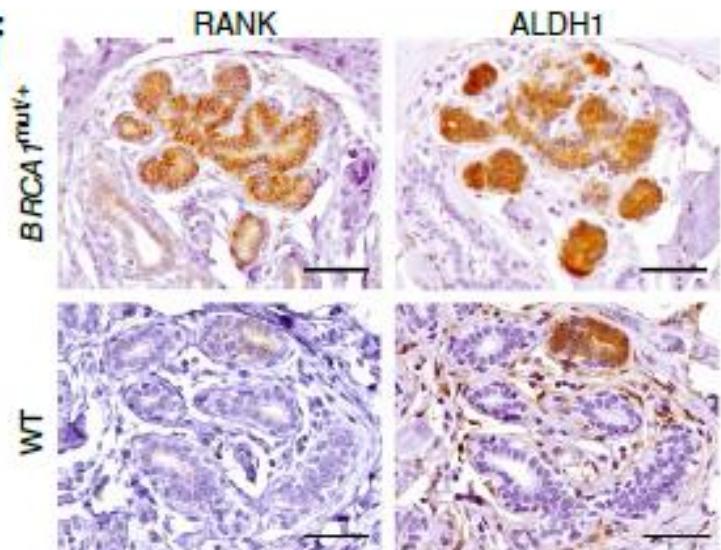
RANK is expressed in the mammary epithelia of BRCA1 mutation carriers and mediates progesterone-induced proliferation

f



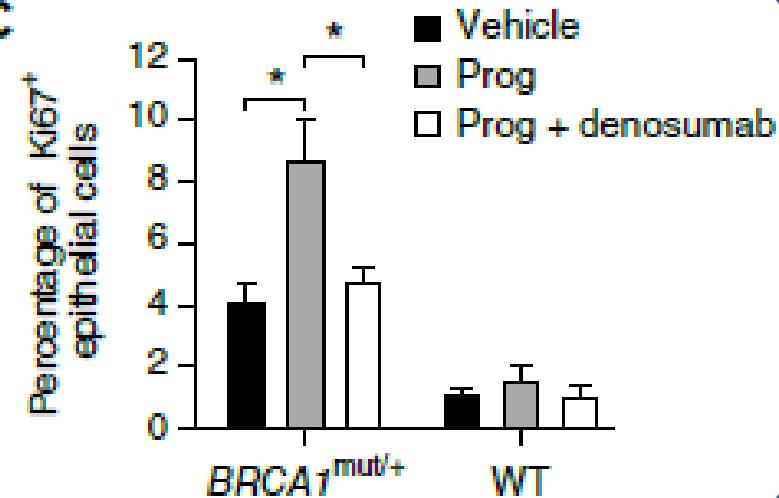
RANK is expressed in the mammary epithelia of BRCA1 mutation carriers and mediates progesterone-induced proliferation

f

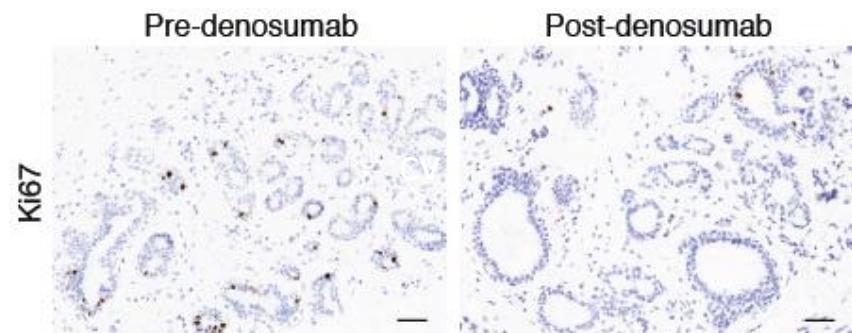
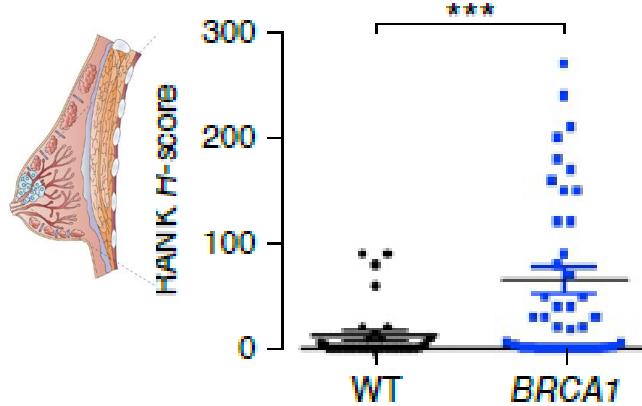


organoids

C



BRCA-D study

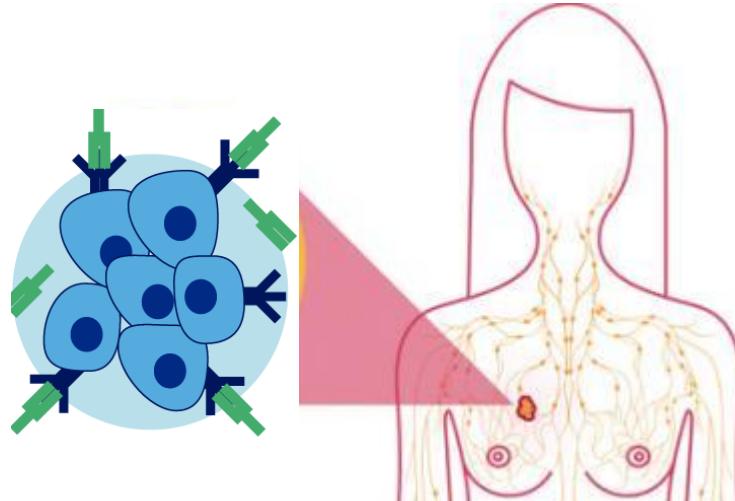


RANK PATHWAY INHIBITORS FOR BREAST CANCER PREVENTION

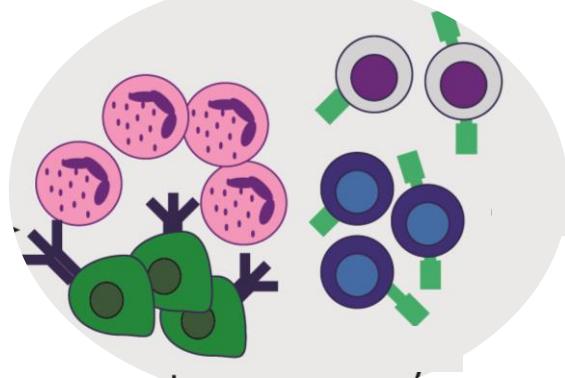
...but TREATMENT?

RANK in breast cancer and immunesurveillance

Breast Cancer



Immune system

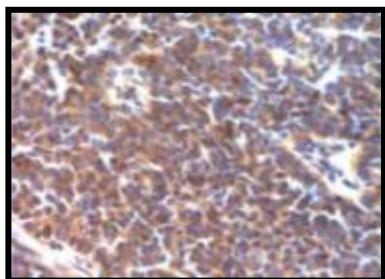


RANK and RANKL expression follow similar patterns in MMTV_PyMT mouse model and in breast cancer patients

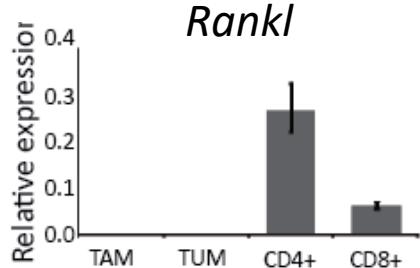
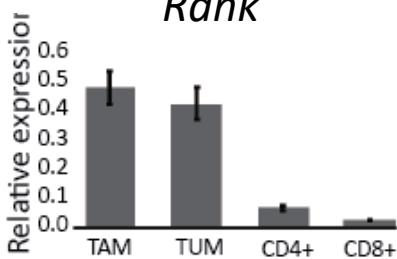
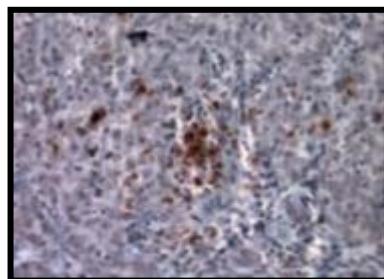


MMTV-PYMT mouse model

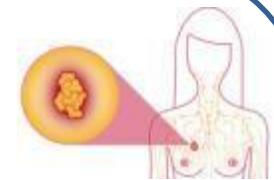
RANK



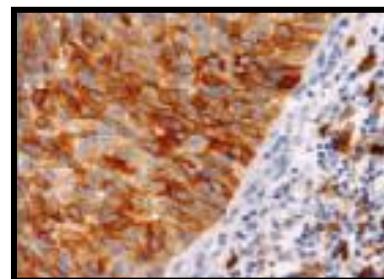
RANKL



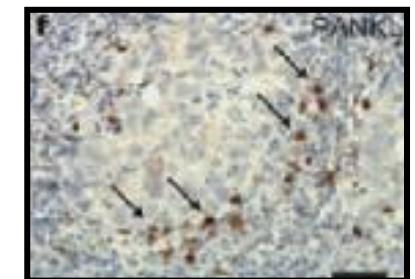
Breast Cancer Patient sample



RANK



RANKL



Tumor cells and TAMs

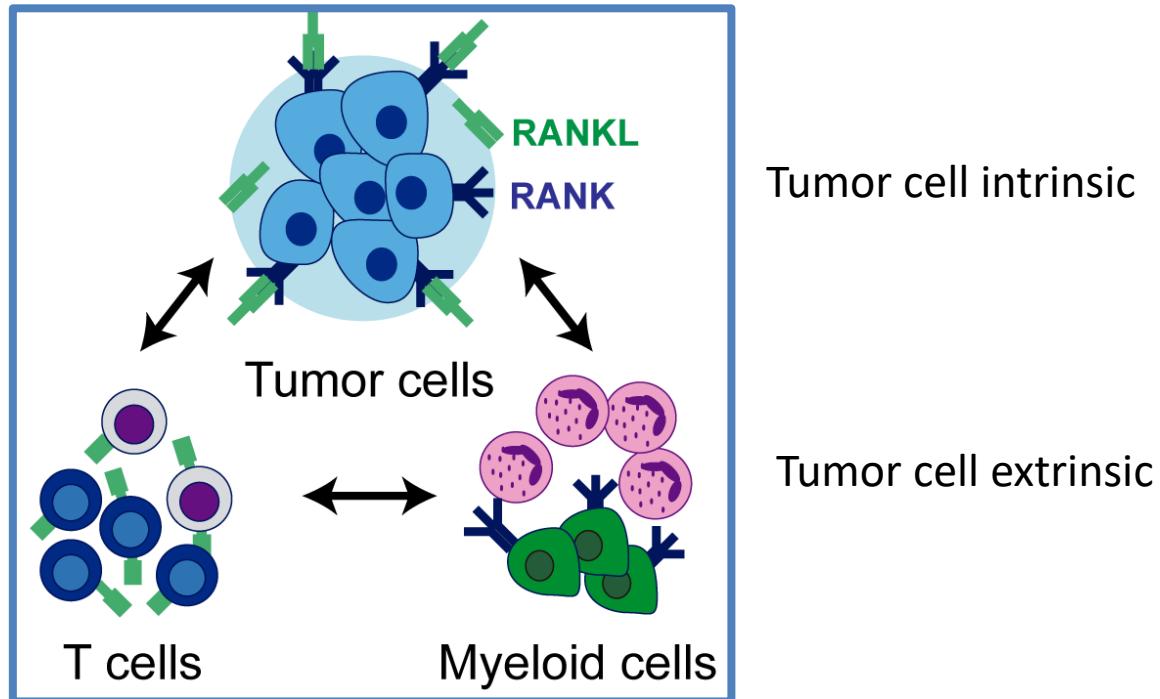
Lymphocytes

TUM: Tumor cells, TAM: Tumor associated macrophages

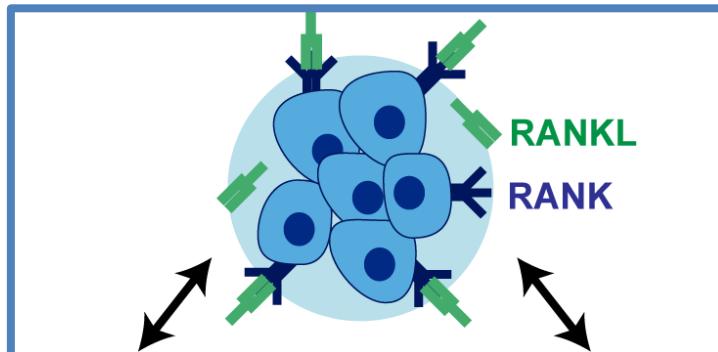
Yoldi et al., Cancer Res, 2016

Palafox et al., Cancer Res, 2012

Therapeutic RANK inhibition?

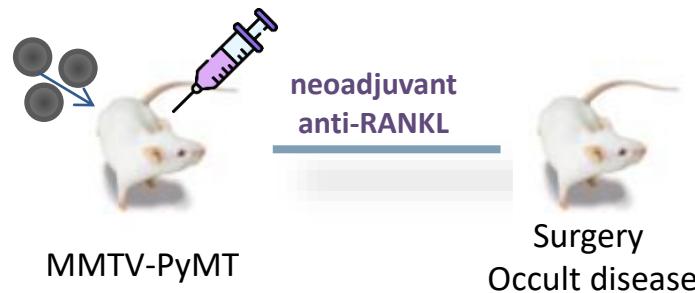


Therapeutic RANK inhibition?

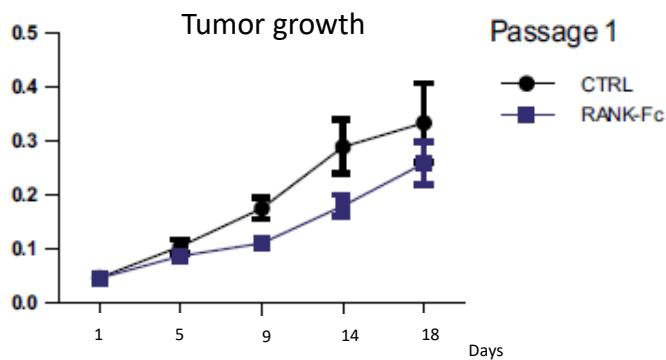


Tumor cell intrinsic

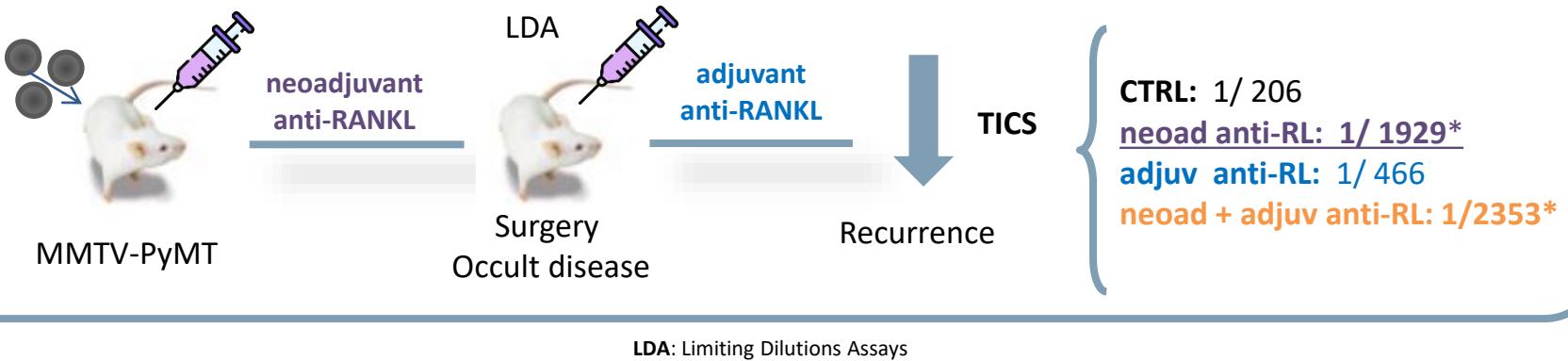
RANKL inhibition decreases cancer stemness and induces tumor cell differentiation



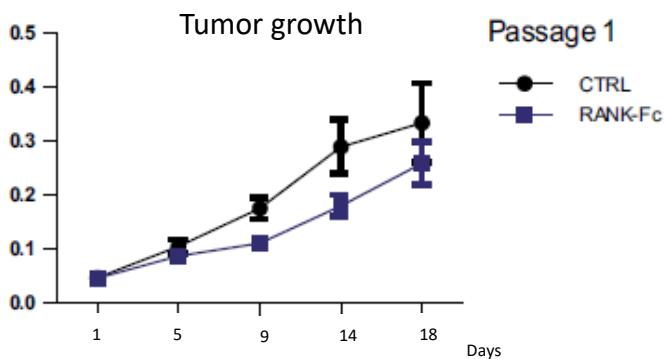
MMTV-PyMT
Anti RANKL treatments in mice



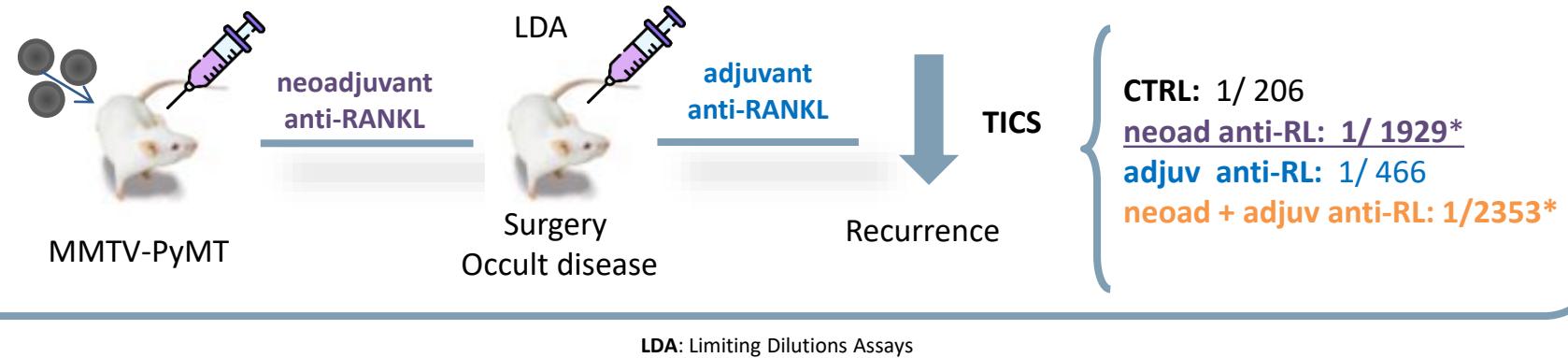
RANKL inhibition decreases cancer stemness and induces tumor cell differentiation



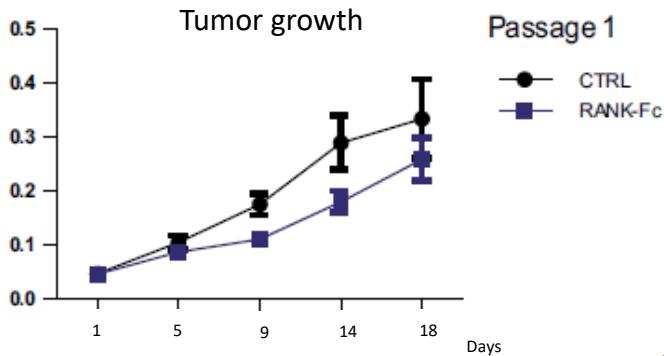
MMTV-PyMT
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RANKL inhibition decreases cancer stemness and induces tumor cell differentiation

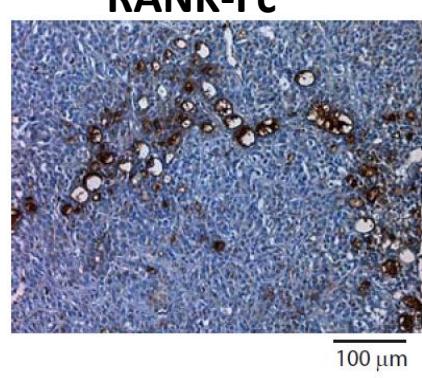
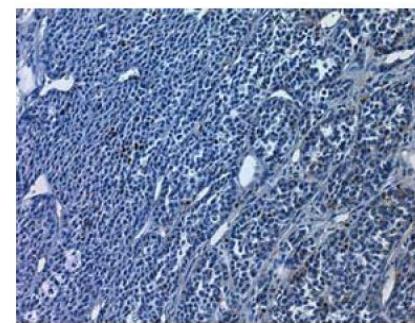


MMTV-PyMT
Anti RANKL treatments in mice

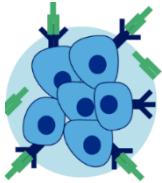


Tumor Cell differentiation
Control

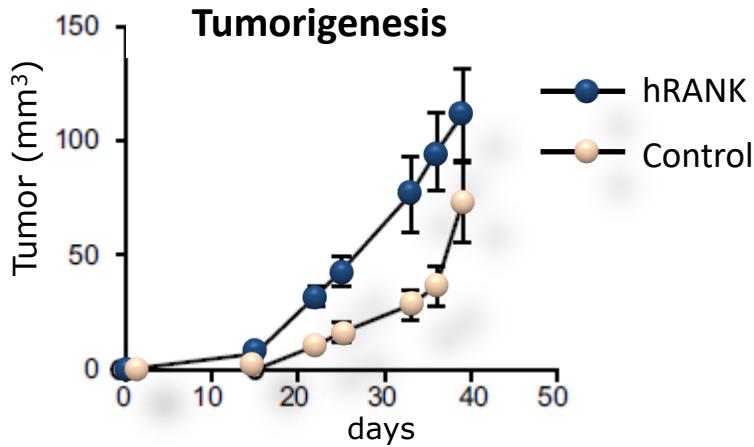
anti-milk



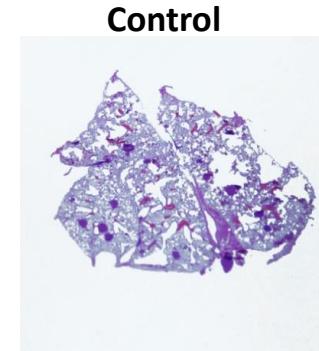
RANK overexpression induces stemness & increases tumorigenesis & metastasis in BRCA1 mutant breast cancer cell lines



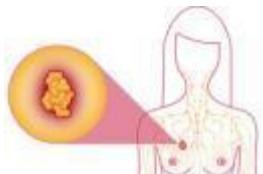
Cancer cell lines (BRCA1)



Metastasis



MDA-MB-436



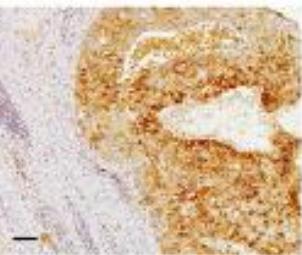
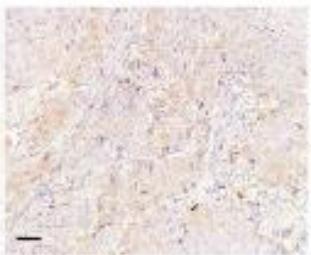
RANK is expressed in a subset of BRCA1 mutant breast cancer PDX & RANKL inhibition enhances the response to docetaxel

1

RANK

RANK

WT



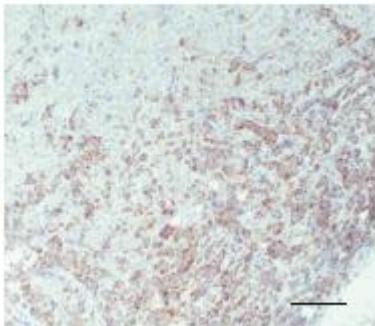
BRCA1

RANK+ (40% of BRCA1 mutated tumors)

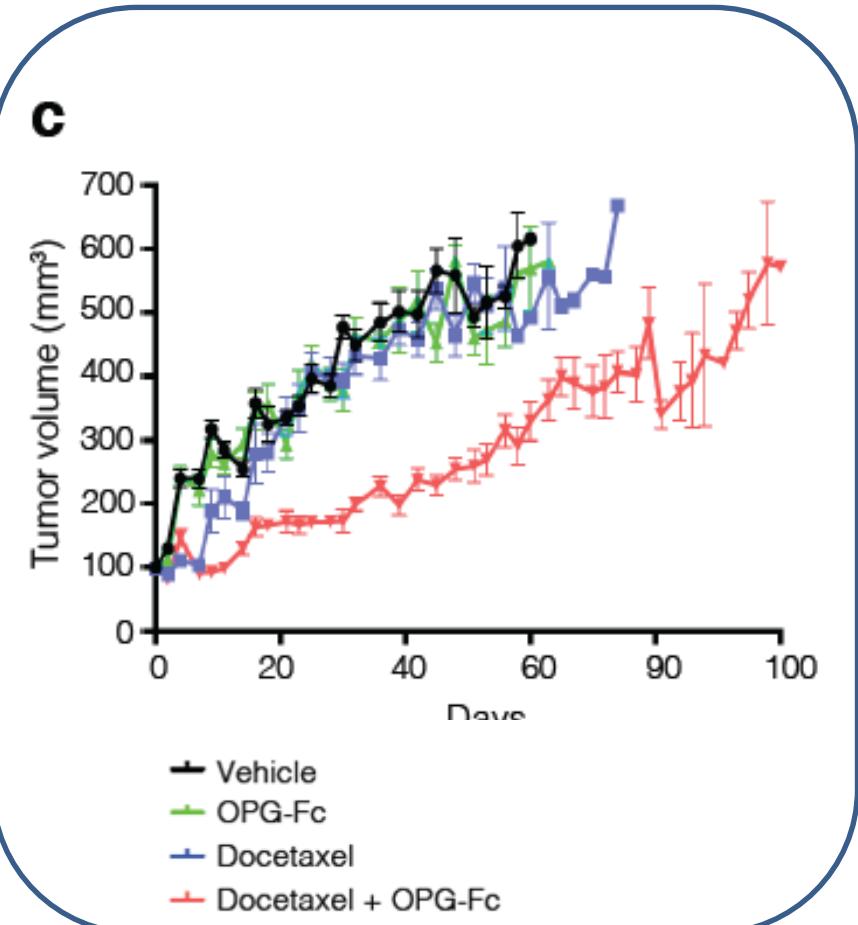
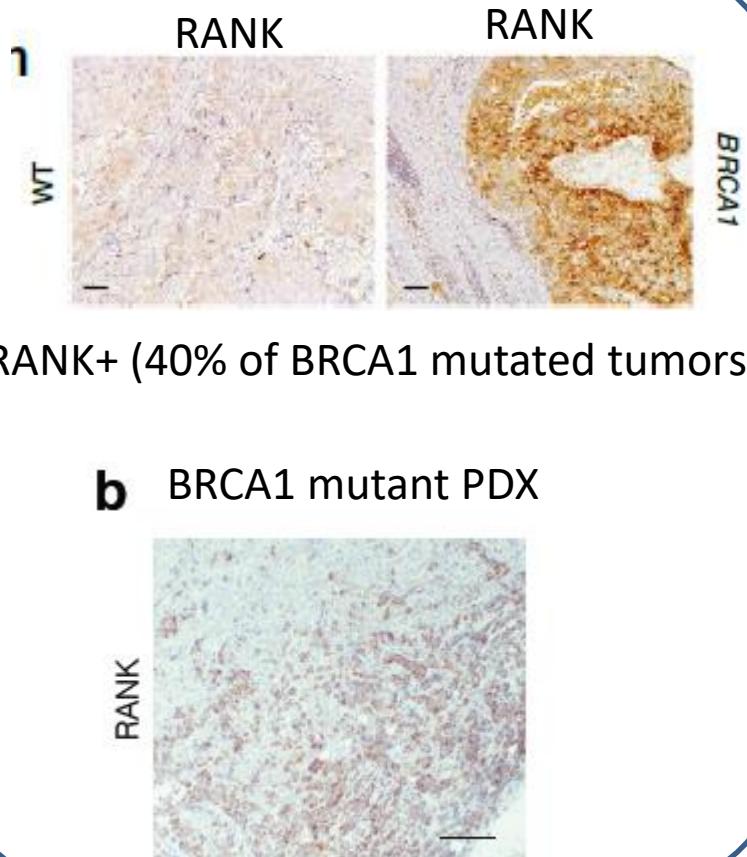
b

BRCA1 mutant PDX

RANK

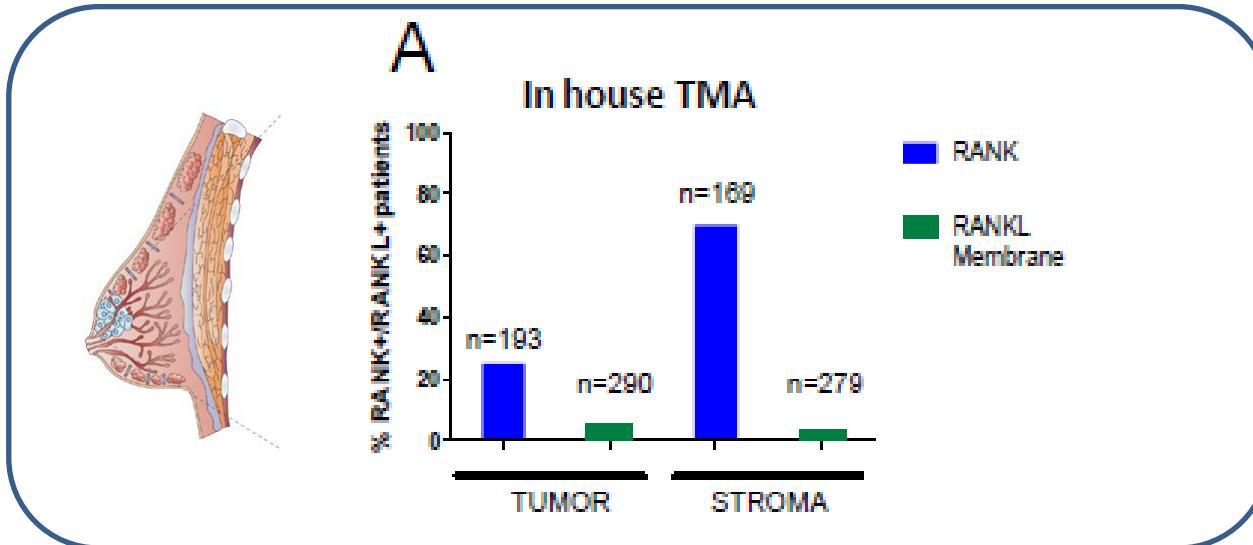


RANK is expressed in a subset of BRCA1 mutant breast cancer PDX & RANKL inhibition enhances the response to docetaxel

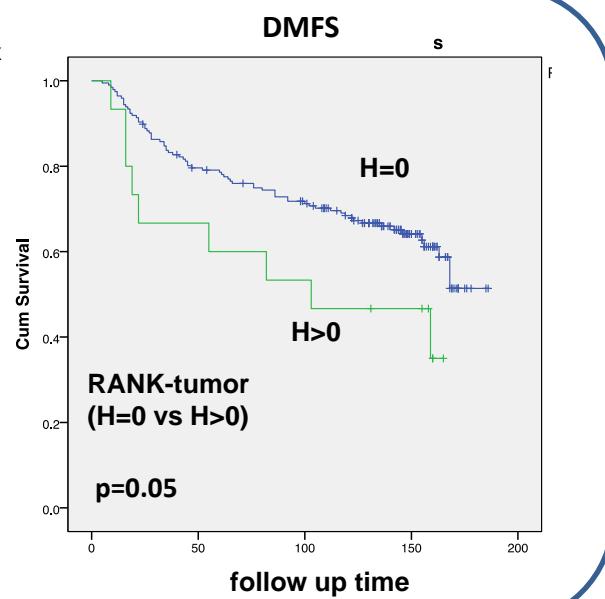
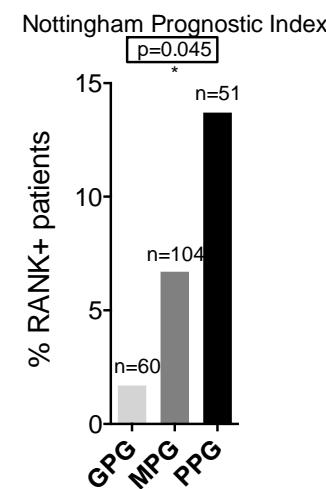
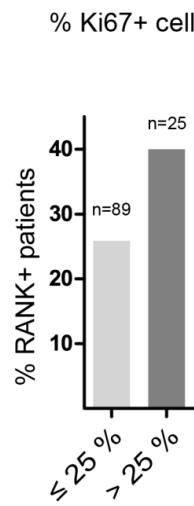
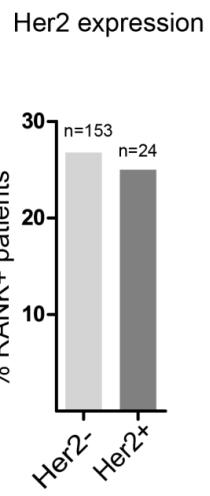
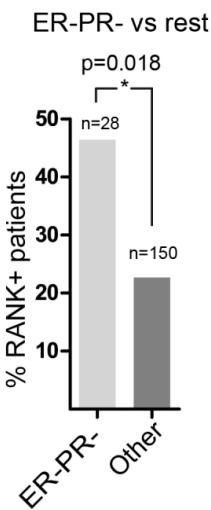


RANK is expressed in a subset of ER+ and ER- tumors and associates with TNBC disease

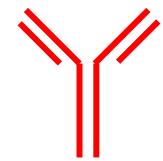
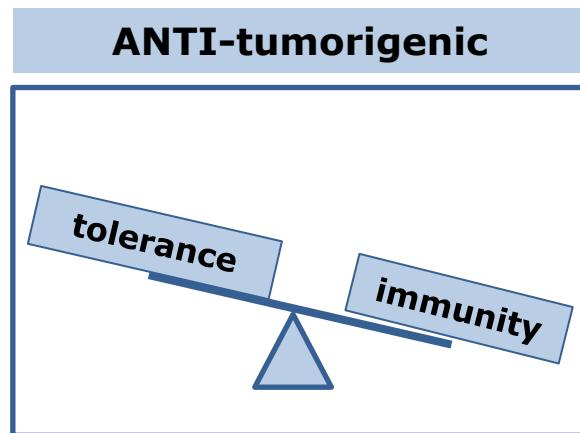
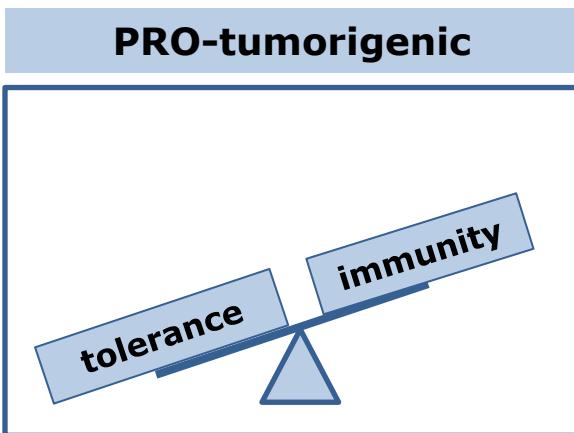
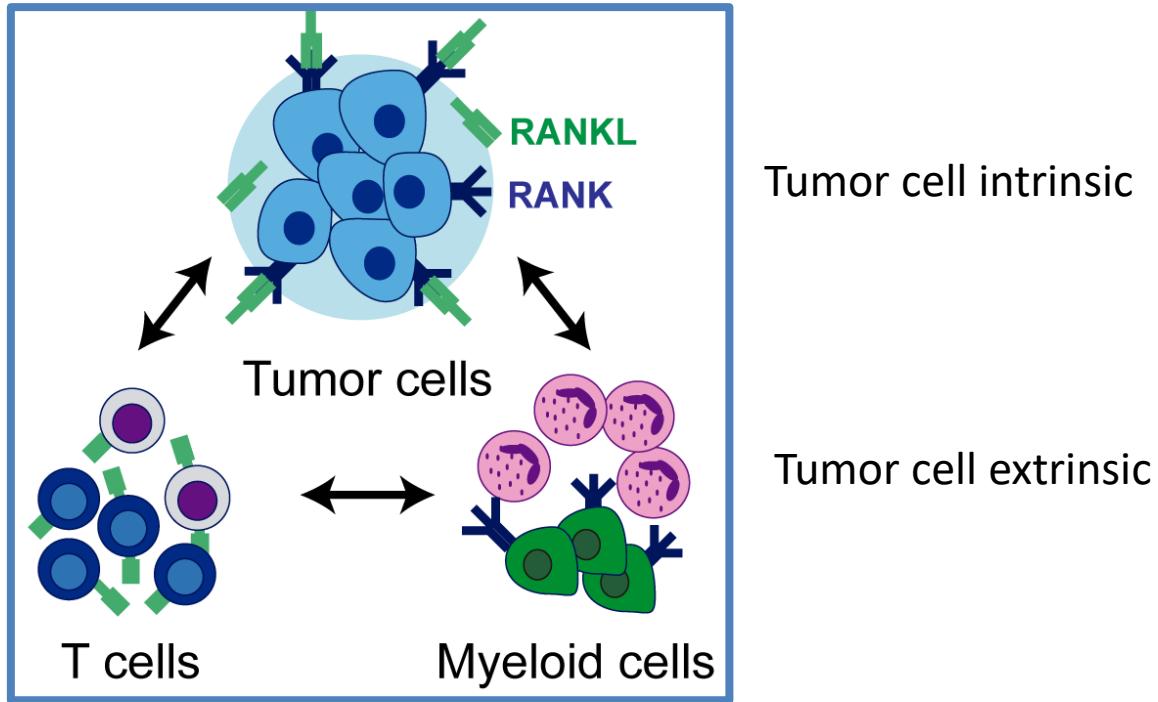
DO NOT POST



IN HOUSE/METABRIC TMA

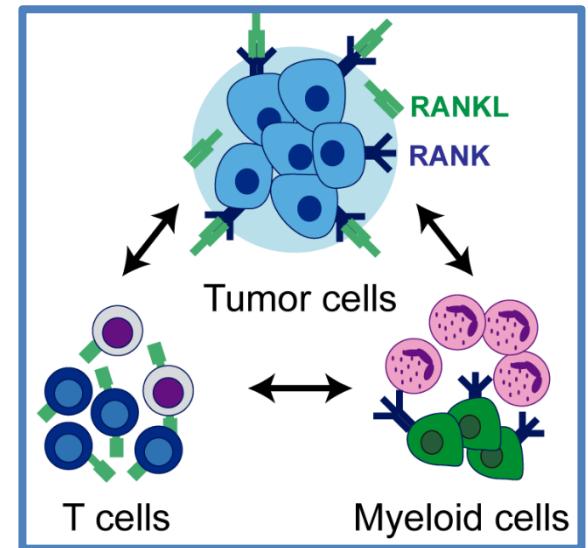
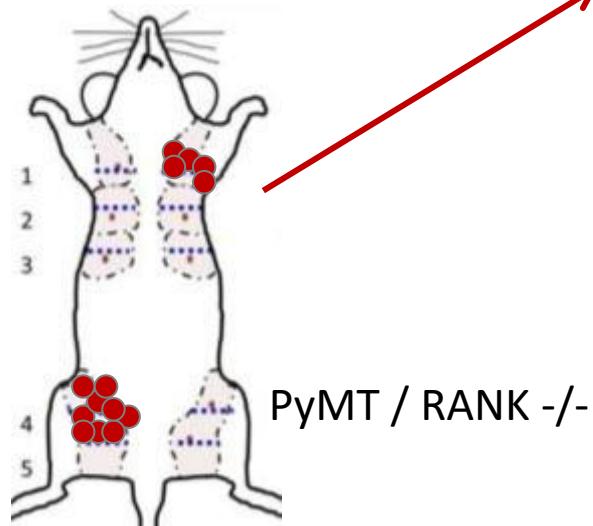
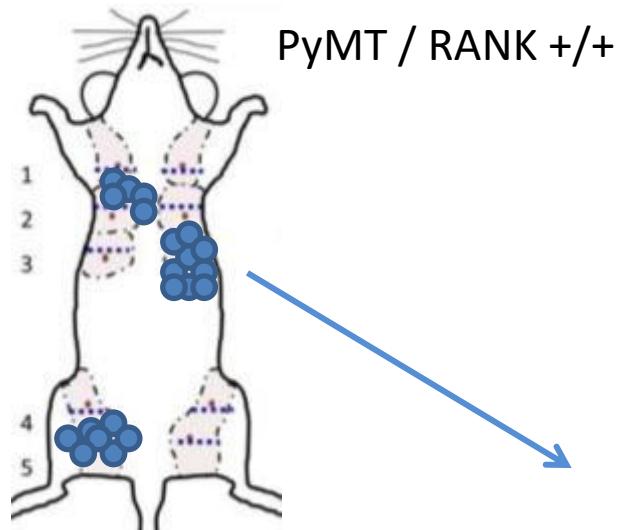


RANK in tumor immune-surveillance



Denosumab

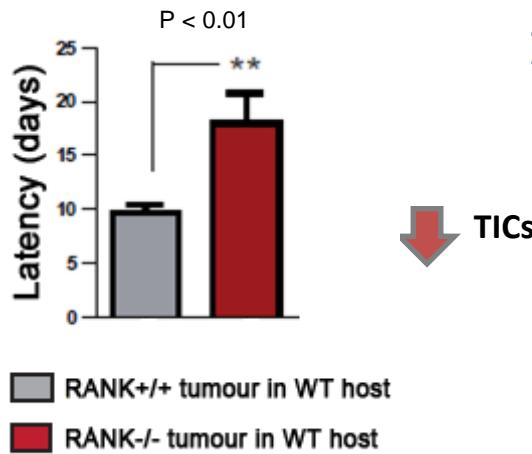
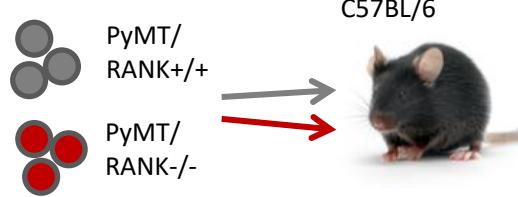
MMTV_PyMT tumor transplants



RANK-/- tumour cells show delayed latency and reduced tumour-initiating ability in syngenic hosts

RANK-/- tumours are infiltrated by more TILs and CD8+ T cells

LOF approach



Tumour-initiating ability:
limiting dilution assays

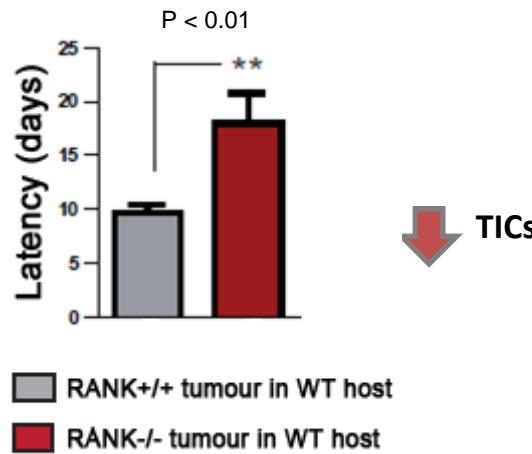
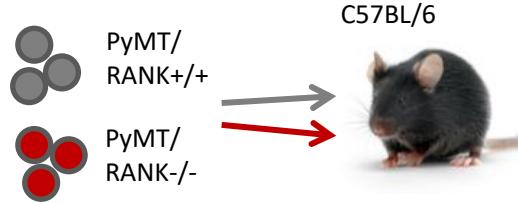
{ RANK^{+/+}: 1/ 285
RANK^{-/-}: 1/ 1078*

TICs: Tumour-initiating cells

RANK^{-/-} tumour cells show delayed latency and reduced tumour-initiating ability in syngenic hosts

RANK^{-/-} tumours are infiltrated by more TILs and CD8+ T cells

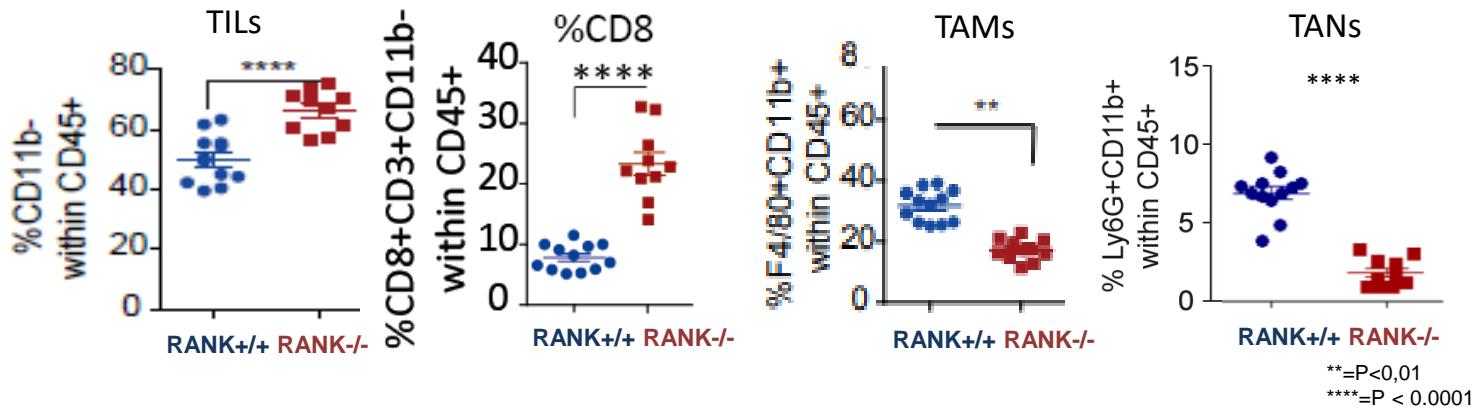
LOF approach



Tumour-initiating ability: limiting dilution assays

RANK^{+/+}: 1 / 285
RANK^{-/-}: 1 / 1078*

TICs: Tumour-initiating cells

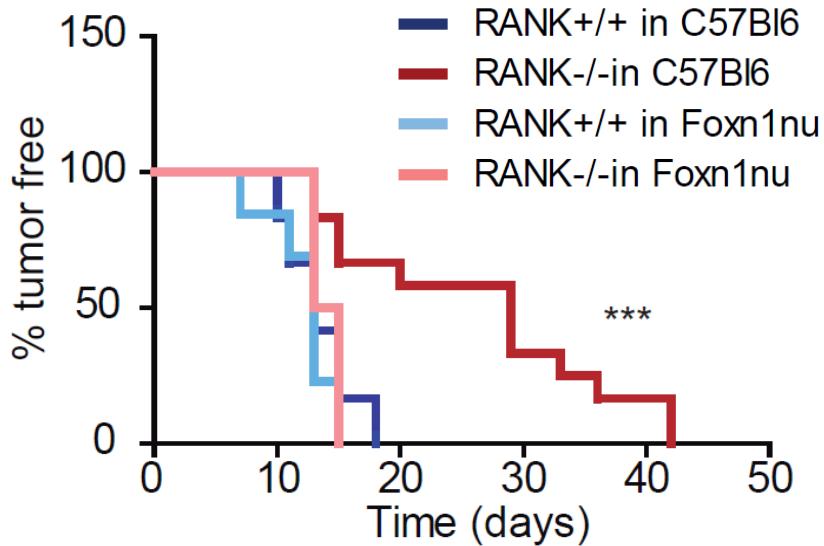


TILs: Tumour-infiltrating lymphocytes

TANs: Tumour-associated neutrophils

TAMs: Tumour-associated macrophages

RANK^{-/-} tumor cells show delayed latency and reduced tumor initiating ability when transplanted in syngeneic hosts



Tumor Initiating Ability: limiting dilution assays



RANK^{+/+}: 1/ 285
RANK^{-/-}: 1/ 1078*

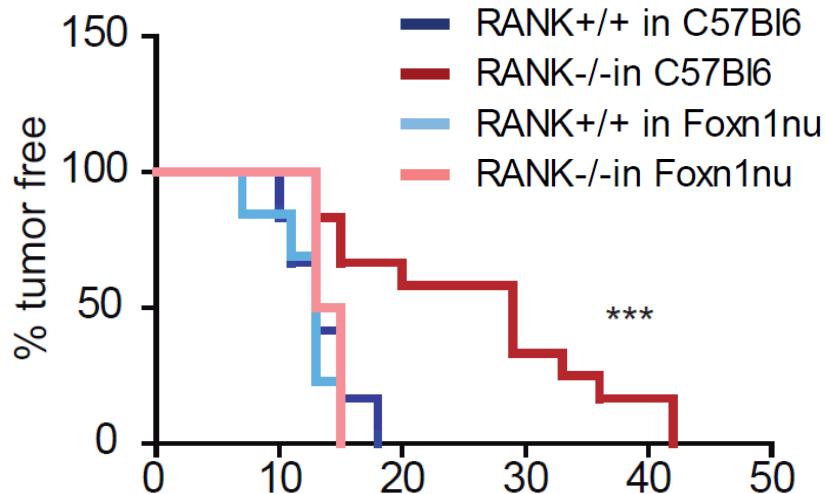
p-value = 0.05 $\chi^2=3.58$



RANK^{+/+}: 1/ 47
RANK^{-/-}: 1/ 16

p-value = 0.196 $\chi^2=1.67$

RANK^{-/-} tumor cells show delayed latency and reduced tumor initiating ability when transplanted in syngeneic hosts



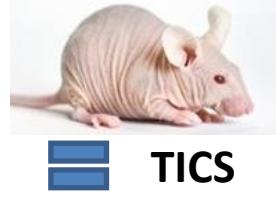
The immune system mediates the differences in tumor latency and tumor initiation in RANK^{-/-} tumors

Tumor Initiating Ability: limiting dilution assays



RANK^{+/+}: 1/ 285
RANK^{-/-}: 1/ 1078*

p-value = 0.05 $\chi^2=3.58$

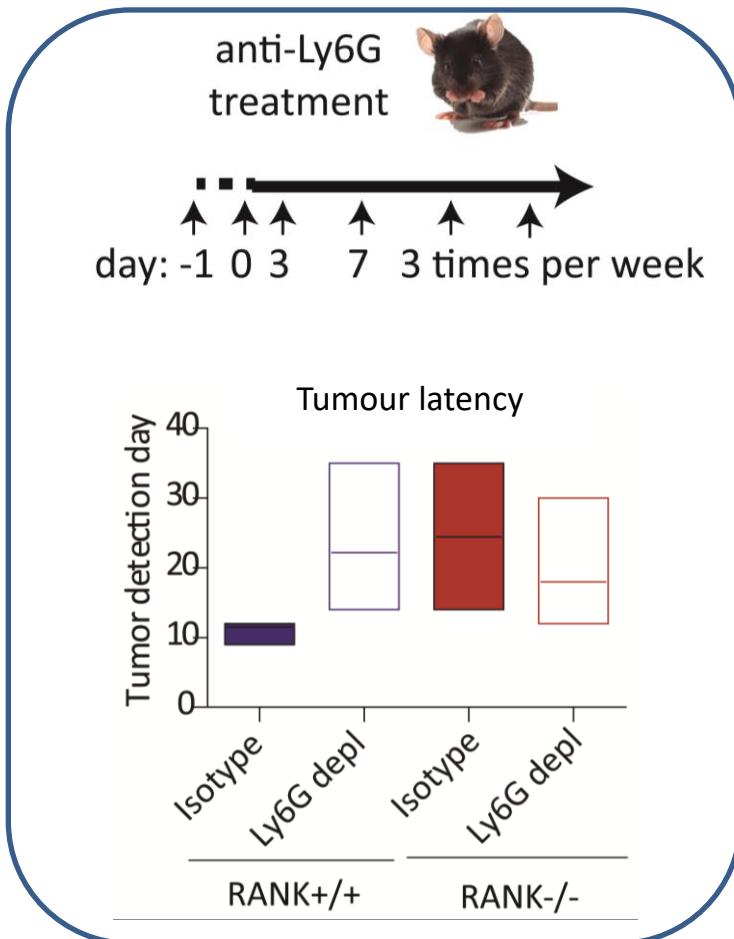


RANK^{+/+}: 1/ 47
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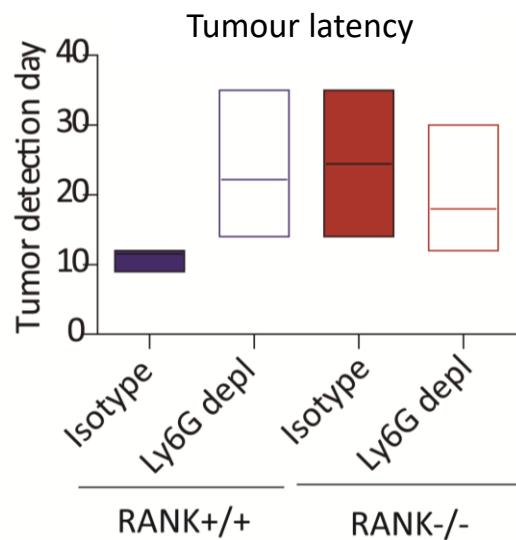
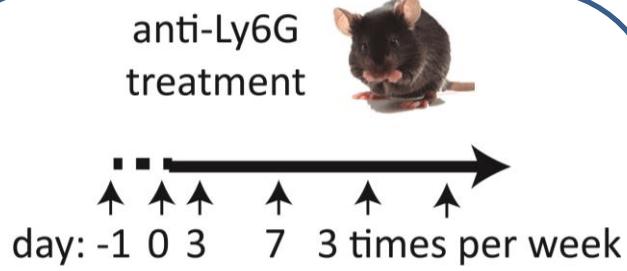
RANK^{-/-} tumour delayed latency is mediated by neutrophils and CD8+ T cells

LOF approach

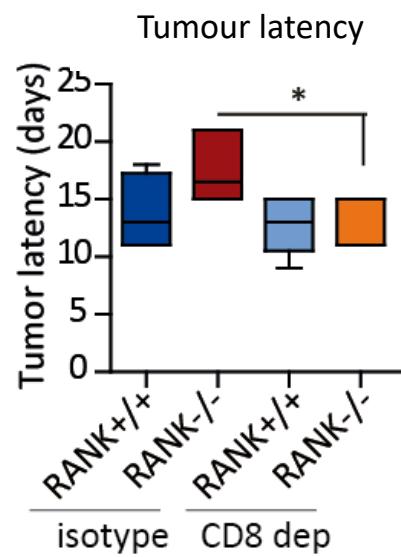
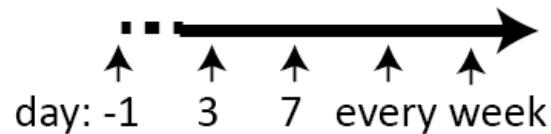


RANK^{-/-} tumour delayed latency is mediated by neutrophils and CD8+ T cells

LOF approach



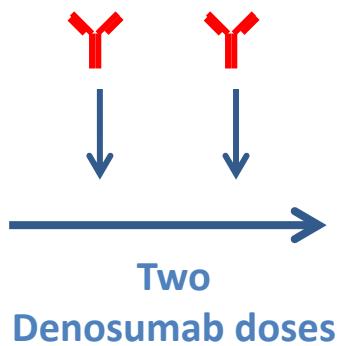
anti-CD8 treatment



D-BIOMARK: neoadjuvant denosumab in early BC. (60 patients, pre/postmenopausal, lum/TNBC)

D-BEYOND: neoadjuvant denosumab in luminal, premenopausal early BC (24 patients, pre, lum)

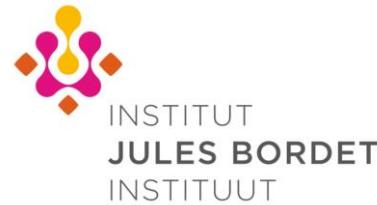
Biopsy (pre-denosumab)



Surgery

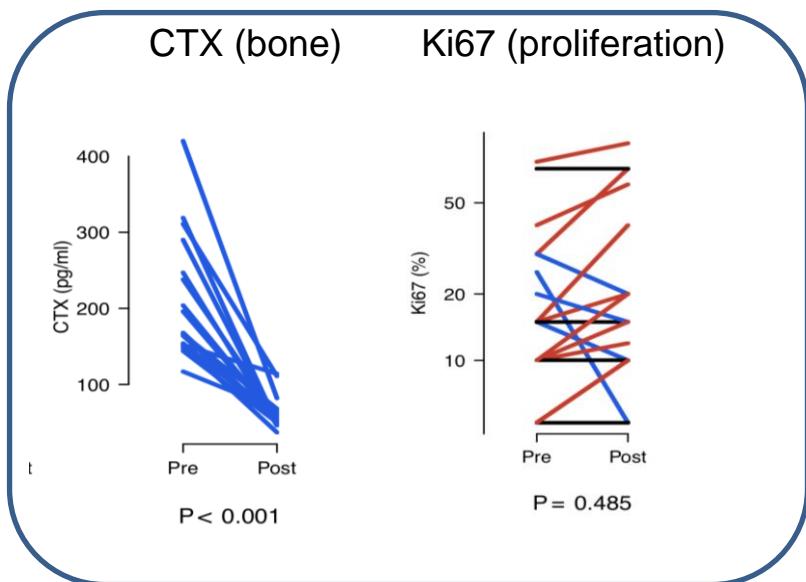
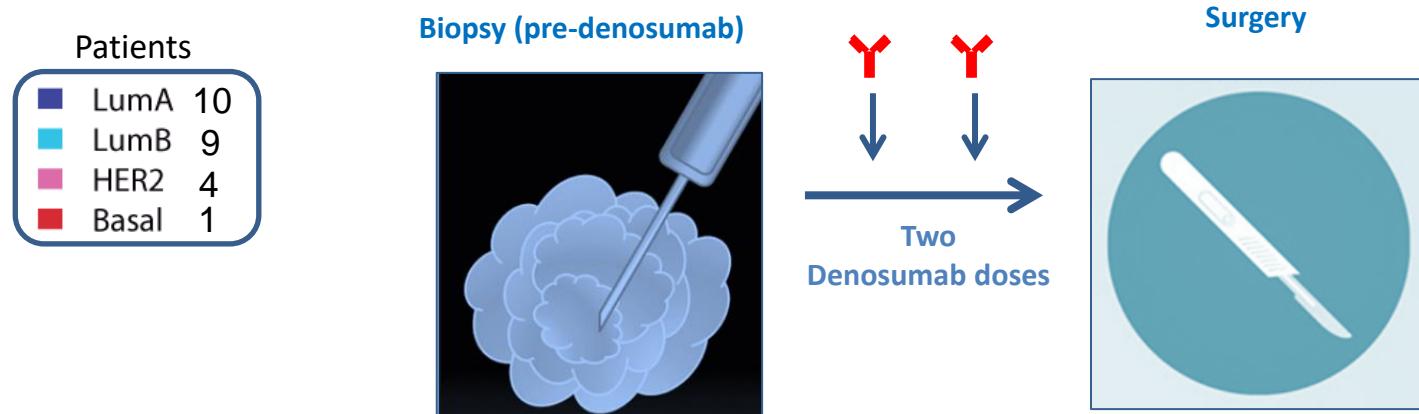


A Vethencourt, EM Trinidad
C Falo, S Pernas
A Urruticoechea
T Soler, A Petit
M Garcia, V Navarro



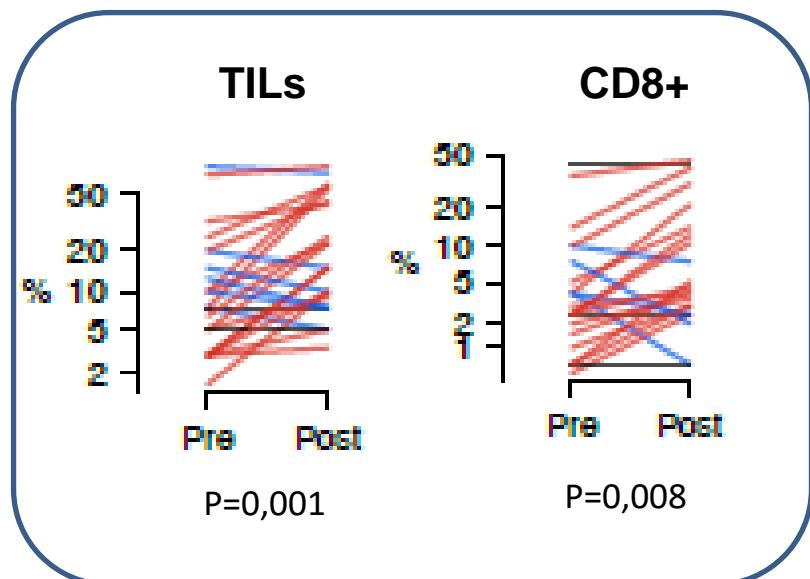
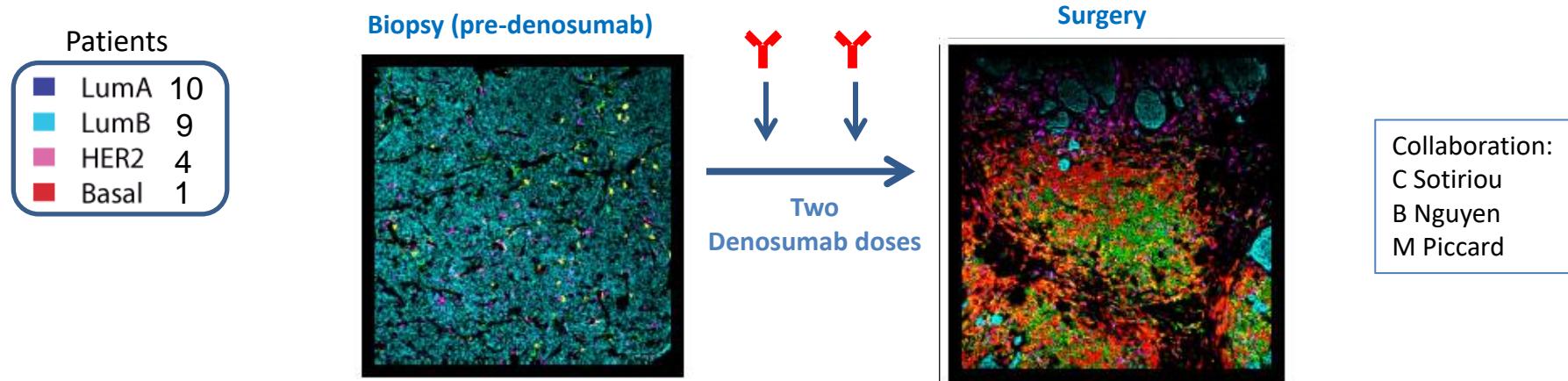
Collaboration:
C Sotiriou
B Nguyen
M Piccard

D-BEYOND: neoadjuvant denosumab in premenopausal early BC (luminal) does not change tumor cell proliferation

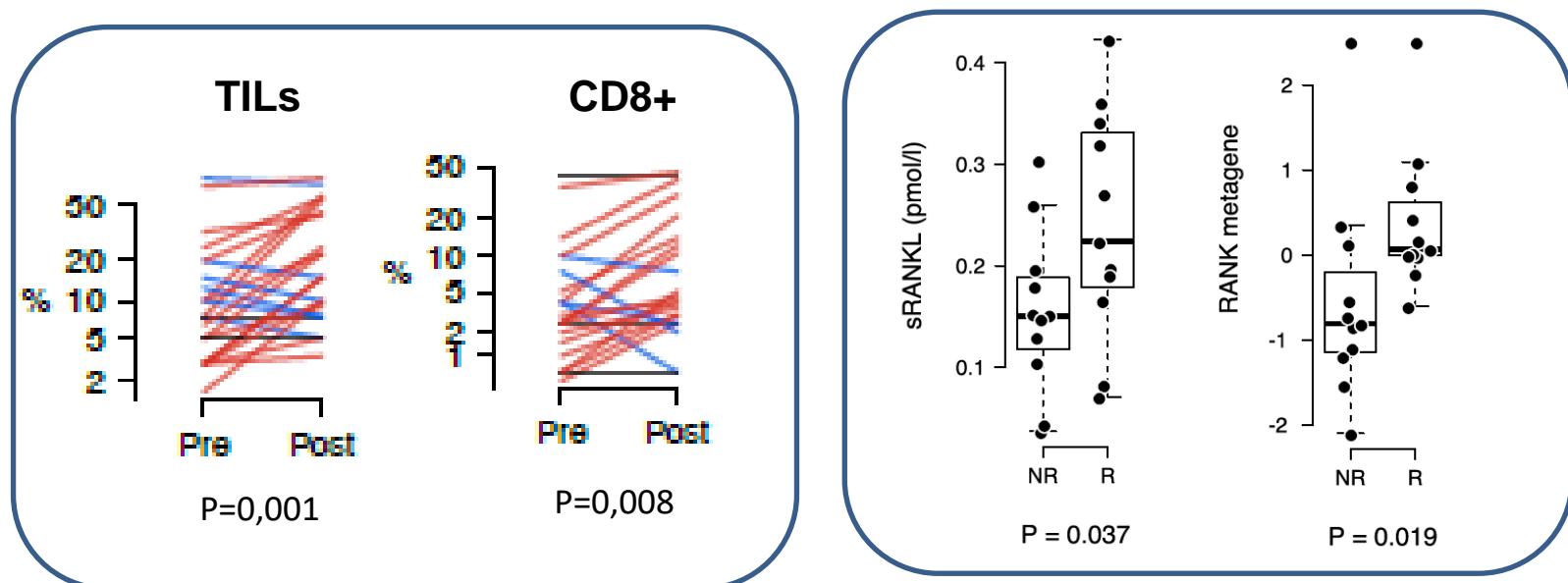
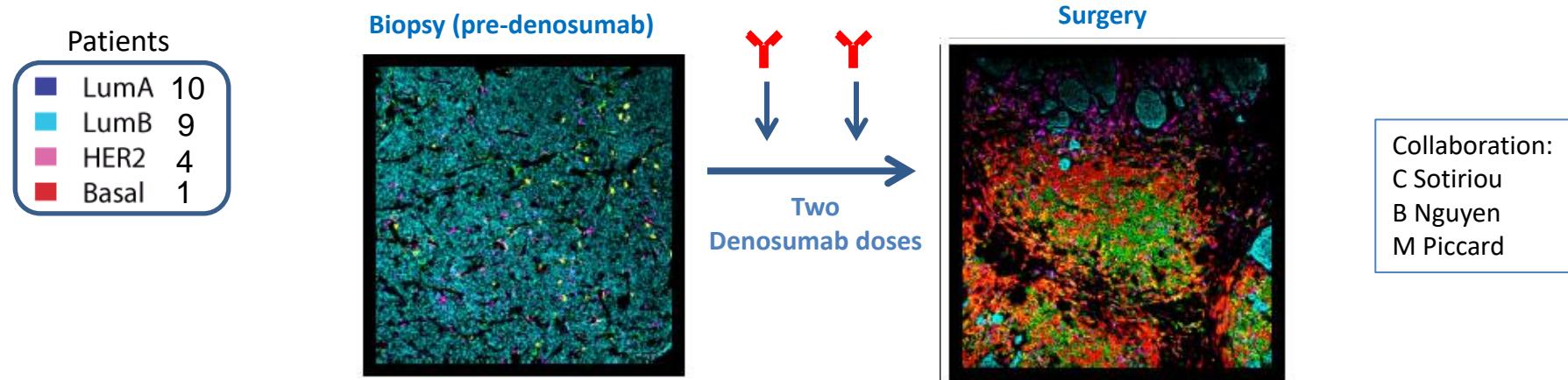


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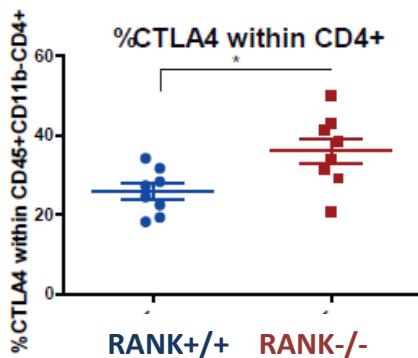
D-BEYOND: neoadjuvant denosumab increases tumor immune infiltration in premenopausal early BC (luminal)



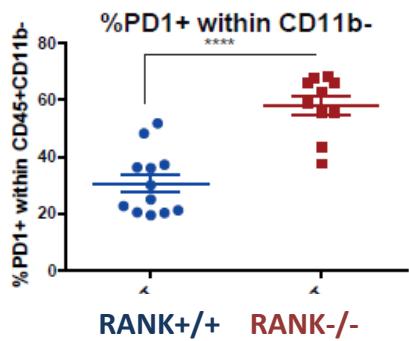
D-BEYOND: neoadjuvant denosumab increases tumor immune infiltration in premenopausal early BC (luminal)



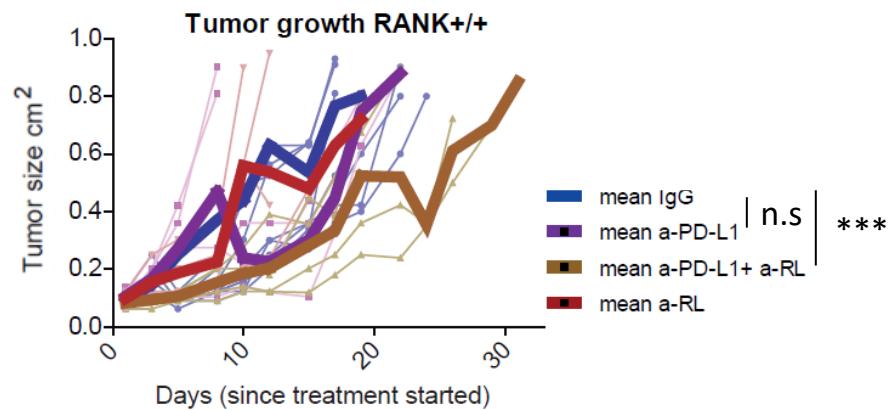
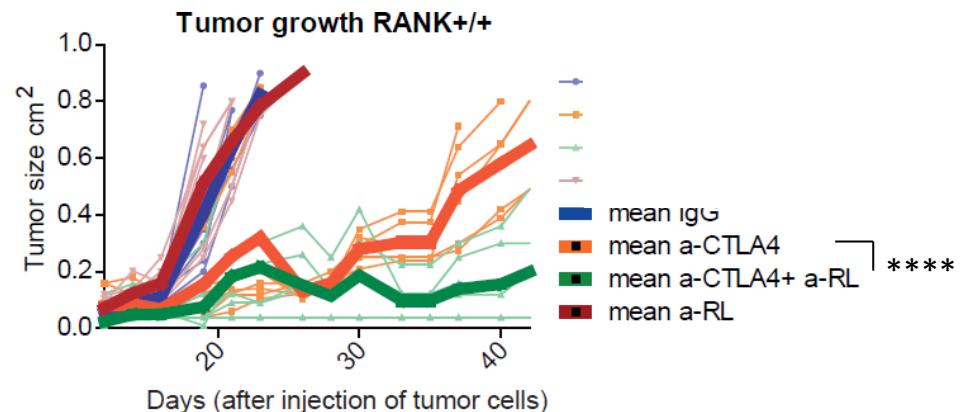
Rankl inhibition improves response to immunotherapy in breast cancer



Early setting:



Late setting:



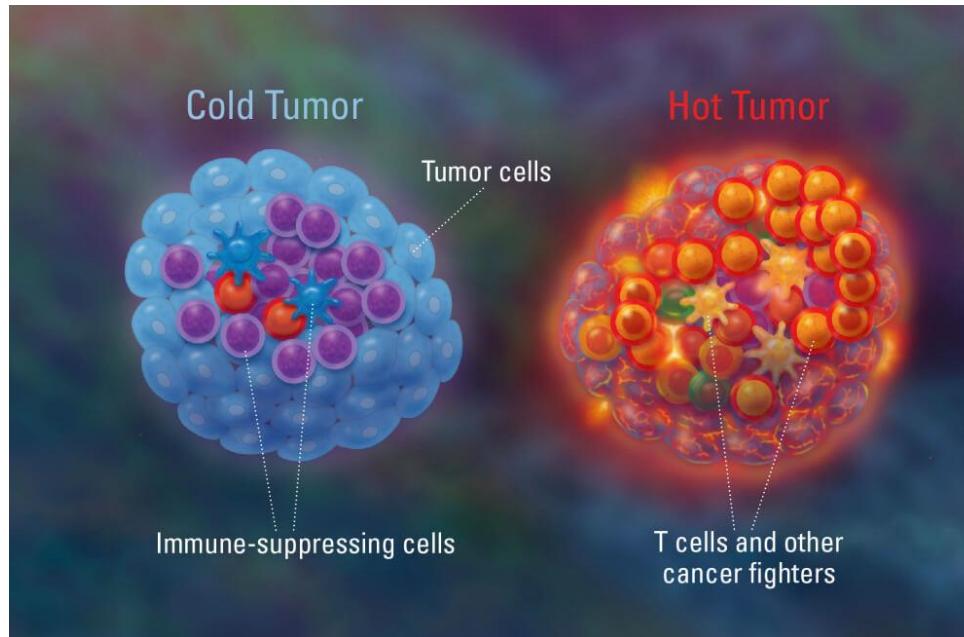
**RANK PATHWAY
INHIBITORS FOR**

**BREAST CANCER
PREVENTION**

AND TREATMENT

not only for BRCA1!

Denosumab → immunomodulator



Post-menopausal?

NCT03691311

TNBC?

Control arm?

D-BIOMARK

Enrollment : 60 patients

- 24 post /pre-menopausal
- 12 TNBC



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IDIBELL 40
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cnio
stop cancer

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ICO
Institut Català d'Oncologia

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AMGEN

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Contra el Cáncer

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DE ESPAÑA
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E INVESTIGACIONES

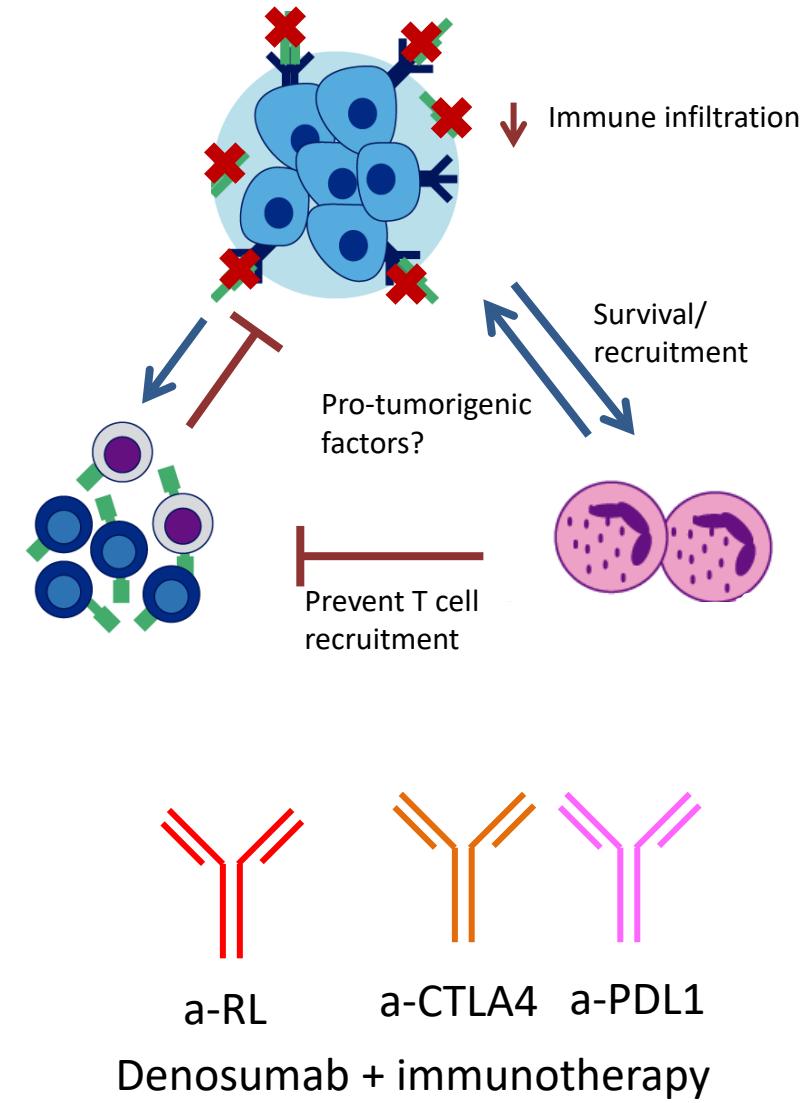
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de Salud
Carlos III

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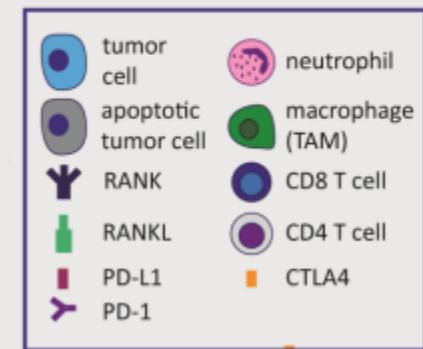
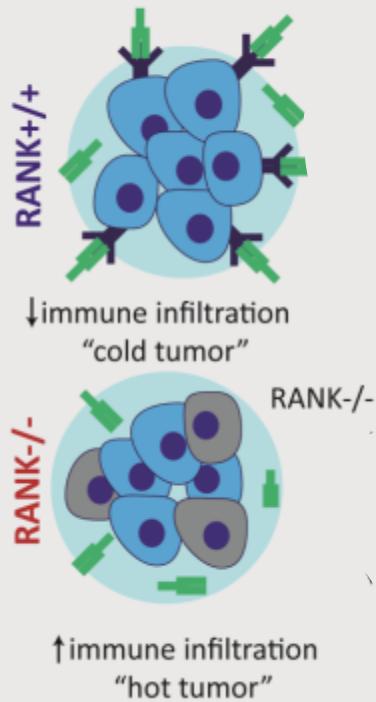
Conclusions

RANK PATHWAY INHIBITORS FOR IMMUNOTHERAPY IN BREAST CANCER

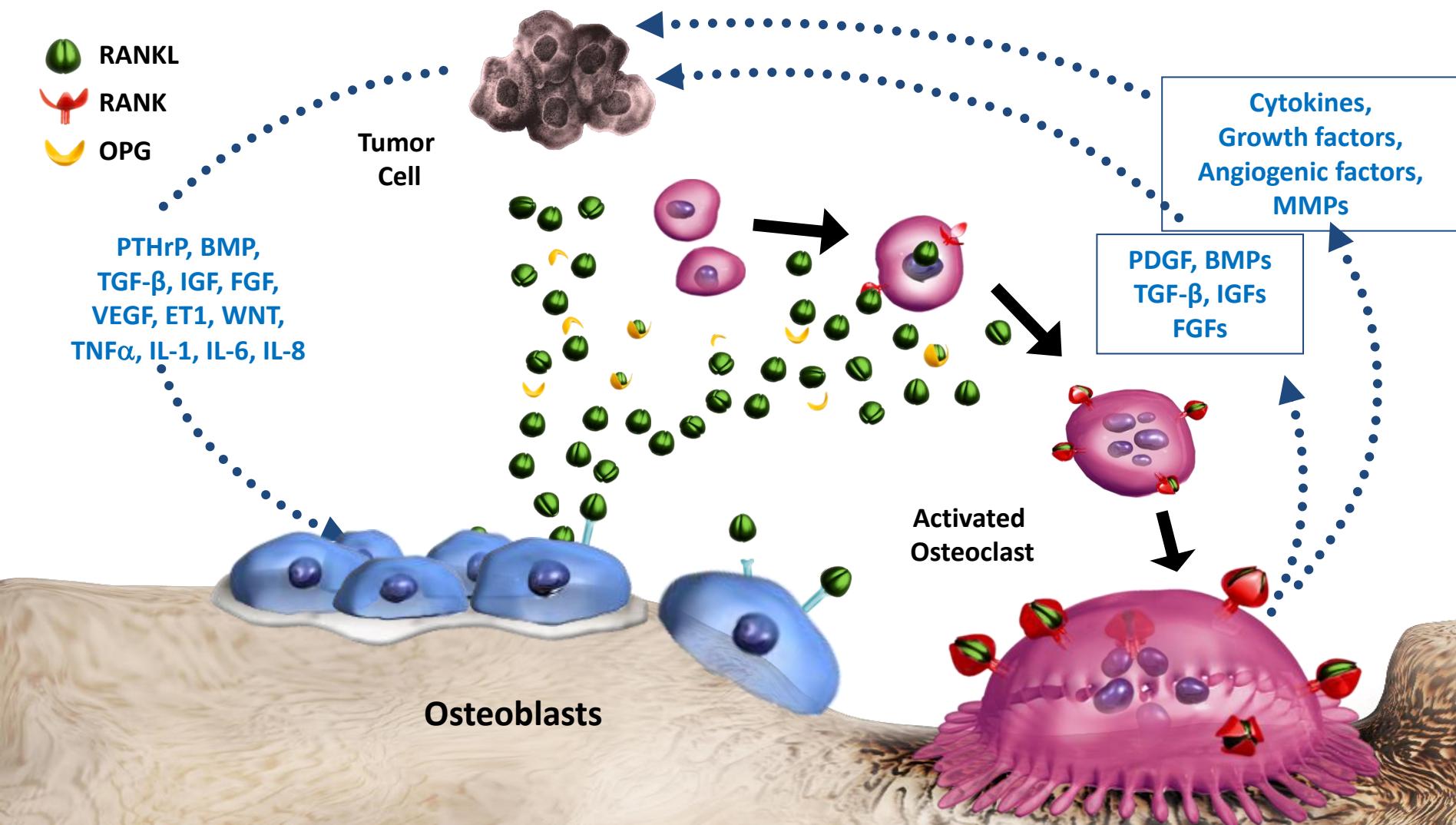


Summary

Conclusions



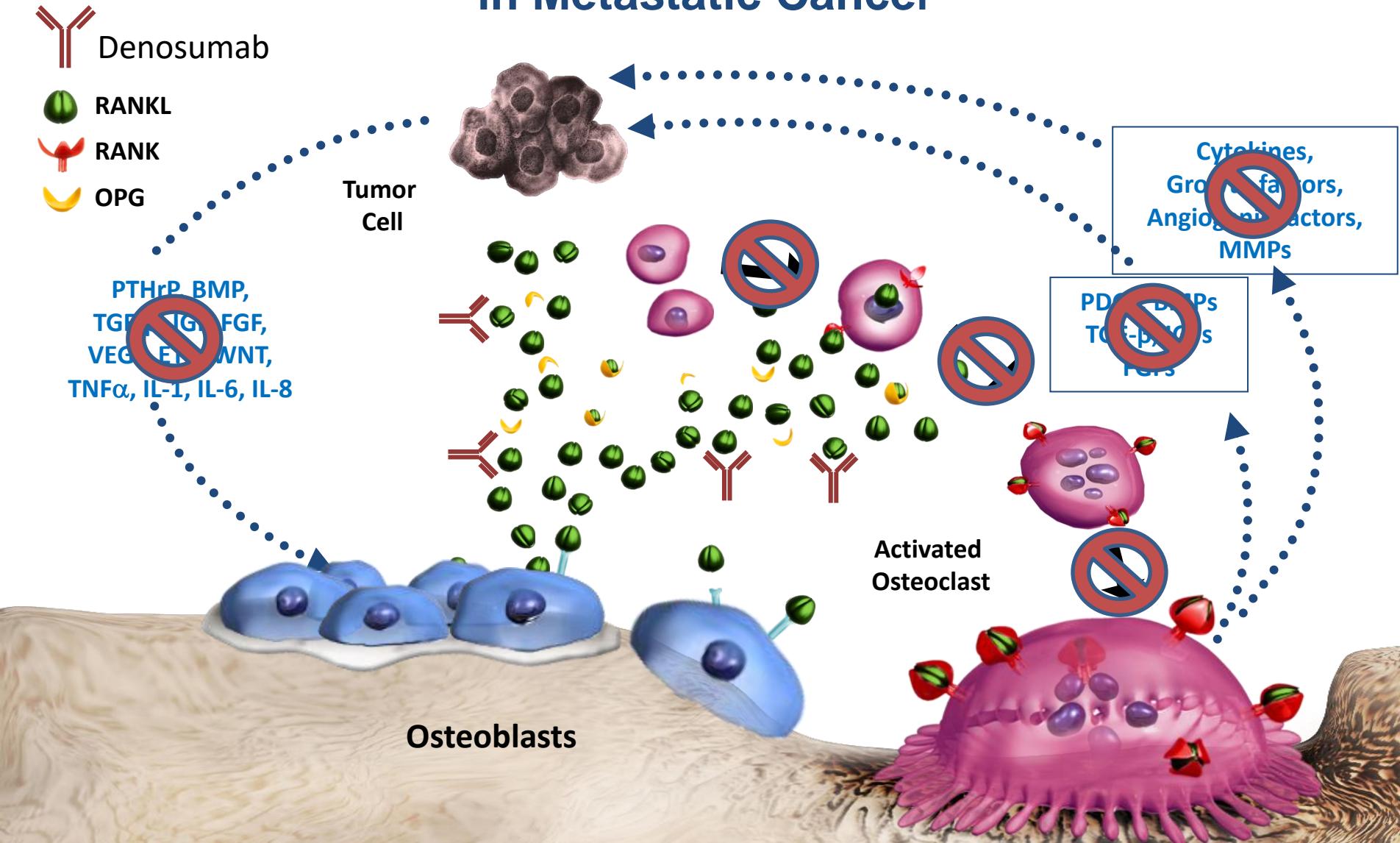
The “Vicious Cycle” Hypothesis of Bone Destruction in Metastatic Cancer



Adapted from Roodman D. *N Engl J Med.* 2004;350:1655.

Amgen Confidential. Do not copy or distribute. Amgen 2007.

The “Vicious Cycle” Hypothesis of Bone Destruction in Metastatic Cancer



Denosumab Binds RANK Ligand and Inhibits Osteoclast Formation, Function and Survival

