

Safety and Feasibility of Intraprostatic Injection of CAN-2409 or Placebo followed by Valacyclovir in Patients on Active Surveillance for Prostate Cancer (ULYSSES Trial)



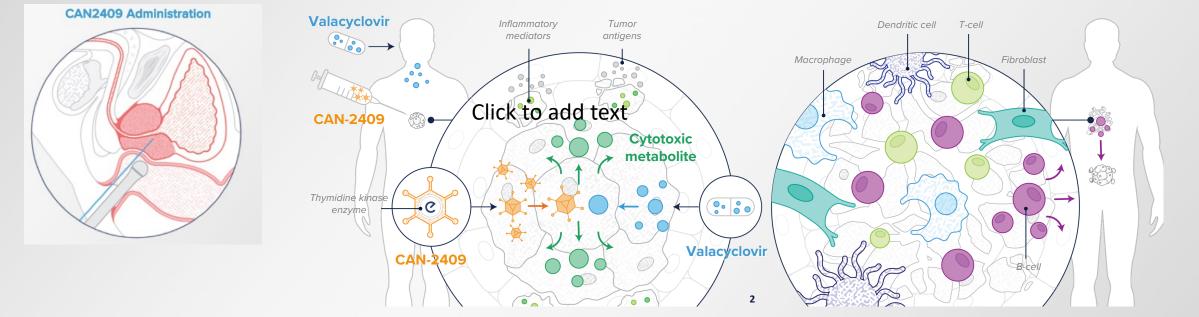
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CAN-2409: Administration and Mechanism of Action

1. CAN-2409 replication-incompetent adenoviral vector expressing HSV-tk, locally administered followed by oral anti-herpetic prodrug (valacyclovir)

2. Localized cytolytic mechanism combined with proinflammatory viral particles

- **3. CAN-2409 induces tumor infiltrating lymphocytes**
- 4. Local immunization yields systemic anti-tumor response

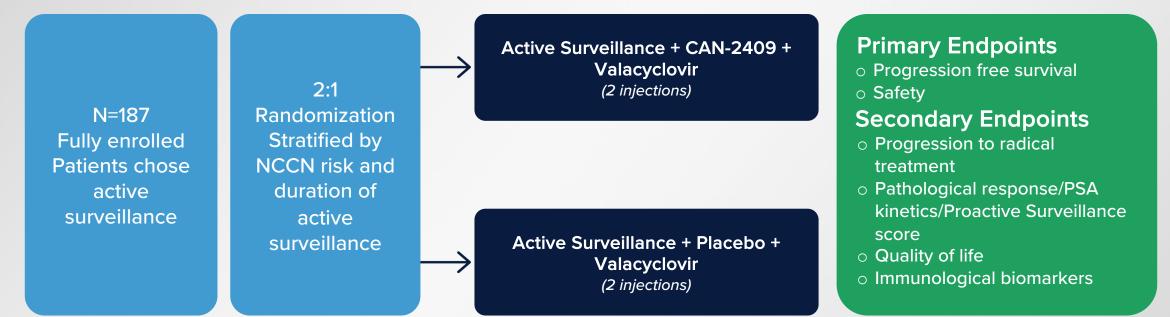


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Phase 2 placebo-controlled, double-blind clinical trial of CAN-2409 during active surveillance for prostate cancer

NCCN low, intermediate or single NCCN high-risk factor
Patients on or choosing active surveillance

Study still blinded with patients in follow up for PFS Blinded safety read out reported in this presentation



			wore than one race	3 (1.0%)
			Not reported	6 (3.2%)
			Ethnicity, n(%)	
Patient De	emographics	Hispanic or Latino	40 (21.4%)	
	0		Not Hispanic or Latino	115 (61.5%)
			Not Reported	32 (17.1%)
	Characteristic		Tumor Stage, n(%)	
187 patients	Age, years		T1c	153 (81.8%)
treated, total 365	Median Age	65	T2a	25 (13.4%)
injections	Range	40 - 81	T2b	6 (3.2%)
performed	-	40 - 01	T2c	3 (1.6%)
periornica	Race, n(%)	152 (01 00 ()	T3a	0 (0.0%)
475 : 10	White/Caucasian	153 (81.8%)	PSA ng/ml	
• 175 received 2	Black/African American	19 (10.2%)	Range	.96 - 23.3
injections + VCV	Asian	1 (0.5%)	<10	160 (85.6%)
	Native Hawaiian or Pacific Islander	0 (0.0%)	10-20	26 (13.9%)
 12 patients 	American Indian or Alaskan Native	0 (0.0%)	>20	1 (0.5%)
received 1	Native or Indigenous	5 (2.7%)	Gleason score,n(%)	
injection + VCV	More than one race	3 (1.6%)	<7	155 (82.9%)
,	Not reported	6 (3.2%)	=7	31 (16.6%)
	Ethnicity, n(%)		>7	1 (0.5%)
	Hispanic or Latino	40 (21.4%)	NCCN risk group,n(%)	
	Not Hispanic or Latino	115 (61.5%)	Low	132 (70.6%)
	-	. , ,	Intermediate	53 (28.3%)
	Not Reported	32 (17.1%)	High	2 (1.1%)
	T1	152 (01.00/)		
	T1c	153 (81.8%)		
	T2a	25 (13.4%)		
	Т2ь	6 (3.2%)	E WEA	ERSITY OF
	T2c	3 (1.6%)	• • • • • • • • • • • • • • • • • • • •	MEDICINE & Cal sciences
	T3a	0 (0.0%)	DieLouie	

PSA ng/ml

Most Common Adverse Events (>=5%)

Out of the 365 transrectal intraprostatic injections performed, there were only 3 (0.8%) hospitalizations due to infection

Most common PT (>=5%)		n=187			
Most common P1 (>=5%)	1	2	3	4	Total (%)
Flu-like symptoms	40 (21)	20 (11)	1(1)	0	61 (33)
Chills	39 (21)	13 (7)	1 (1)	0	53 (28)
Fever	39 (21)	9 (5)	1(1)	0	49 (26)
Fatigue	27 (14)	10 (5)	1(1)	0	38 (20)
Elevated AST/ALT	28(15)	3(2)	1(1)	0	32(17)
Elevated Creatinine	23 (12)	5 (3)	1 (1)	2(1)	31(17)
Headache	20(11)	5(3)	0	0	25(13)
Urinary tract infection	1(1)	15(8)	2(1)	0	18 (10)
Nausea	12(6)	4(2)	0	0	16(9)
Low Hemoglobin	15(8)	0	0	0	15(8)
Diarrhea	10(5)	3(2)	0	0	13(7)
Malaise	10 (5)	2(1)	0	0	12 (6)
Hematuria	12 (6)	0	0	0	12 (6)
Urinary frequency	9 (5)	2 (1)	0	0	11 (6)
Urinary tract pain	6 (3)	3 (2)	0	0	9 (5)
Urinary urgency	7 (4)	2(1)	0	0	9 (5)
Elevated Alkaline Phosphatase	8 (4)	1(1)	0	0	9 (5)
Elevated Bilirubin	7(4)	3(2)	0	0	10(5)

Conclusions

- Intraprostatic injections of either placebo or CAN-2409 followed by oral valacyclovir in men with prostate cancer on active surveillance are feasible and well tolerated.
- Cancer-specific efficacy endpoints will be evaluated at end of study.
- If effective, implementation of this therapeutic modality appears to be straightforward and safe.



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