# **MANGO** therapeutics

# Unbiased in vitro and in vivo drug anchor screens identify mechanisms of resistance and sensitization for MTA-cooperative PRMT5 inhibitors in MTAP-deleted cancer models Steven Lombardo<sup>1,2</sup>, Matthew R Tonini<sup>1,2</sup>, Lauren Grove<sup>1</sup>, Silvia Fenoglio<sup>1</sup>, James Tepper<sup>1</sup>, Binzhang Shen<sup>1</sup>, Zachary Decker<sup>1</sup>, Hannah Stowe<sup>1</sup>, Shangtao Liu<sup>1</sup>, Samuel

## Abstract # B098

## INTRODUCTION

Homozygous deletion of the MTAP gene is one of the most common genetic alterations in cancer, affecting 10-15% of all human cancer. Clinical MTA-cooperative PRMT5 inhibitors, including TNG908 and TNG462, were developed to leverage the vnthetic lethal interaction between PRMT5 inhibition and MTAP deletion. Indeed, the first disclosed clinical data for an MTA-cooperative PRMT5 inhibitor demonstrated the ability of TNG908 to selectively inhibit PRMT5 in MTAPsparing adjacent normal, MTAP-proficient cells in patients. To further explore the mechanism of action of inhibitors in MTAP-deleted cells, we employed multiple CRISPR-based editing platforms (CRISPRr PRa) to conduct unbiased MTA-cooperative PRMT5 inhibitor anchor screens in vitro and in vivo. A panel mechanisms that are specific to MTA-cooperative inhibitors. Specifically, the results of these screens identify 1) the effect of MTA/SAM metabolism on MTA-cooperative PRMT5 inhibitors, and 2) identification of potential sub-stratification with MTAP-deleted cancer, and 3) the activity of PRMT5 in anti-apoptotic pathways and synergy between PRMT5 and BCLxL inhibition



Figure 1: TNG908 and TNG462 are synthetic lethal MTA-cooperative PRMT5 inhibitors. (A) MTAP deletion frequency in a subset of human cancers (Cerami et al 2012; Gao et al 2013; Lee et al 2014). (B) Biological rationale for sensitivity of MTAPdeleted cells to PRMT5 perturbation. (C) Differentiating strategy between non-MTA-cooperative PRMT5 inhibitors and TNG908 or

## Leveraging the Tango CRISPR platform for PRMT5 inhibitor in vitro and in vivo anchor screens



Figure 2: Leveraging Tango CRISPR platform for PRMT5 inhibitor anchor screens. Top: Scheme representing Tango CRISPR platforms for target discovery and translational biology. Bottom: Summary table of completed MTA-cooperative PRMT5 inhibitor anchor screens including CRISPR nuclease (CRISPRn) platform for gene knockout, CRISPR interference (CRISPRi) platform for gene knockdown and CRISPR activation (CRISPRa) platform for gene upregulation.

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Figure 4: PTEN loss is common in glioblastoma and may sensitize MTAP-deleted tumors to TNG908. (A) CRISPRn gRNA depletion or enrichment in A549 MTAP-null cells treated +/- an MTA-cooperative PRMT5i in vitro tool molecule (TNG PRMT5i) in vitro. PTEN was among the most significantly depleted with TNG PRMT5i treatment. (B) CRISPRn gRNA depletion or enrichment in A549 MTAP-null cells treated +/- an MTA-cooperative PRMT5i in vivo tool molecule (TNG PRMT5i) in vivo with the CRISPR-StAR system. PTEN was among the most significantly depleted with TNG PRMT5i treatment. (C) CRISPRn gRNA depletion or enrichment in LN18 MTAP-null GBM cells treated +/- an MTA-cooperative PRMT5i in vitro tool molecule (TNG PRMT5i) in vitro. PTEN was among the most significantly depleted with TNG PRMT5i treatment. (D) Concurrent MTAP-deletion and PTEN loss in 166 MTAP-deleted glioblastoma samples (Cerami et al., 2012 and Gao et al., 2013). Loss is defined as putative driver mutations or homozygous deletion. (E) Overall survival determined in an orthotopic U87MG MTAP-null GBM CDX model either treated with vehicle or 120 mpk BID TNG908 (n=10 mice per group). Of note, rodent TNG908 brain Kpuu ~0.15. (F) Efficacy of TNG908 in a subcutaneous MTAP-null GBM PDX model (D) n=5 mice per group. The GBM PDX model was dosed BID for the indicated time, and then tumor volumes were monitored for the indicated time period after completion of dosing. 4/5 mice were cured.

the most significantly enriched with TNG PRMT5i treatment. (B) CRISPRn gRNA depletion or enrichment in MC38 MTAP-KO syngeneic xenograft model treated +/- an MTA-cooperative PRMT5i in vivo tool molecule (TNG PRMT5i) in vivo. Positive regulators of polyamine metabolism pathway such as Amd1 and Srm were among the most significantly enriched with TNG PRMT5i treatment. (C) Pathway illustration of polyamine metabolism process and the potential connection to PTEN//mTOR pathway (Adapted from Casero et al., Nat Rev Cancer 2018 and Zabala-Letona, A., Nature 2017). Anchor screen hits are designated by purple boxes. (D) In vitro 7-day viability assay of LN18 cell line with or without AZIN1 KO in response to TNG908 or GSK3326595, a SAM-cooperative PRMT5i. (E) LC-MS/MS confirmation of extracellular or intracellular MTA levels in LN18 cell line with or without AZIN1 KO. Extracellular MTA levels are normalized to cell number. Intracellular MTA levels are normalized to intracellular SAM levels. (F) In vitro 7-day viability assay of putrescine in combination with TNG908 or GSK3326595 in the LN18 cell line. (G) In vitro 7-day viability assay in the HAP1 MTAP-isogenic cell line pair with treatment of TNG908 +/- putrescine. (H) Immunoblot analysis of HAP1 MTAP WT cancer cell lines treated with a combination of putrescine and TNG908 for 72hrs. At doses where synergy was observed in 7-day CTG assays, SDMA levels were unchanged by putrescine addition suggesting that MTA may not be the only alteration driving the synergy or decreased potency shown in (D).

Crown Biosciences, Enamine, Pharmaron, WuXi AppTec, and XenoSTART

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