



First selective JAK1 inhibitor: GLPG0634 from hit to Proof of Concept

Dr. Christel Menet
Project Director, Medicinal Chemistry

Protein Kinase 2012
May 2012





GLPG0634

The 1st selective JAK1 inhibitor

- Introduction
- Target identification
- Hit finding to PCC
- Clinical development
 - Phase I
 - Phase II Proof of Concept

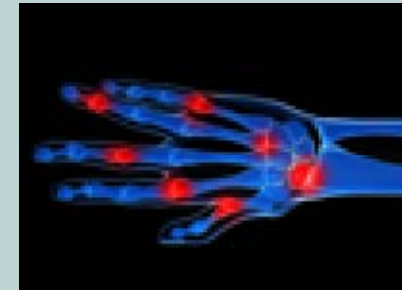


Rheumatoid arthritis (RA)

A global health issue

Disease facts

- Inflammation & destruction of joints
- Affects ~1% of population
- Typically diagnosed age 40-60
- 2-3 times more prevalent in women



Current treatments

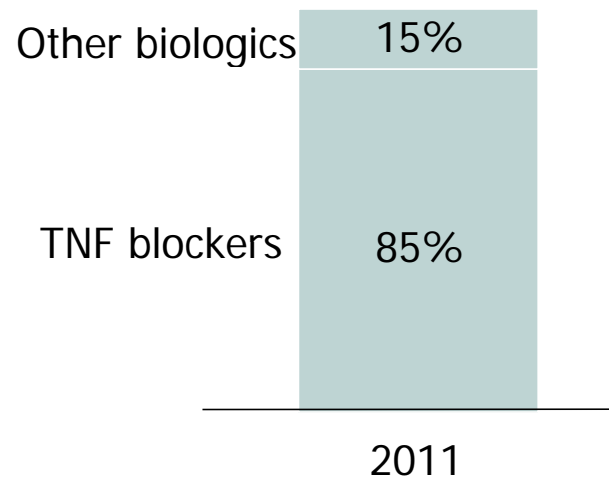
- First line: steroids, methotrexate (MTX)
- Second line: disease-modifying biologics
 - TNF α blockers (Enbrel[®], Remicade[®], Humira[®])
 - IL-6 (Actemra[®]), B & T-cells (Rituxan[®], Orencia[®])
 - effective in 50-60% of MTX non-responders



New wave of RA oral therapies

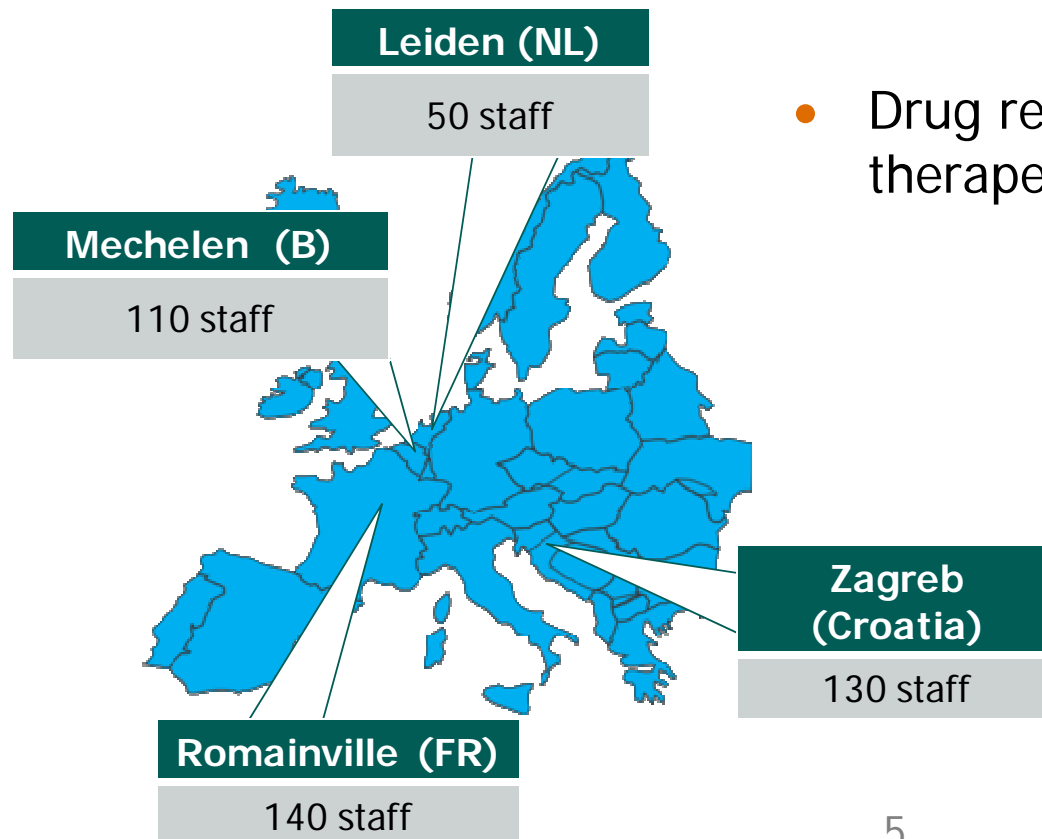
Small molecule drugs in development for RA

- Easier to use (oral administration)
- Lower cost of goods
- Comparable efficacy & safety profile to biologics



Galapagos: a leader in European biotech

- One of the largest biotech pipelines in Europe
- > 800 staff in pharmacology/biology, chemistry and drug development
- 400 staff fee-for-service organization in UK: discovery research activities



- Drug research & development in various therapeutic areas throughout Europe



Galapagos approach

From protein to drug





GLPG0634

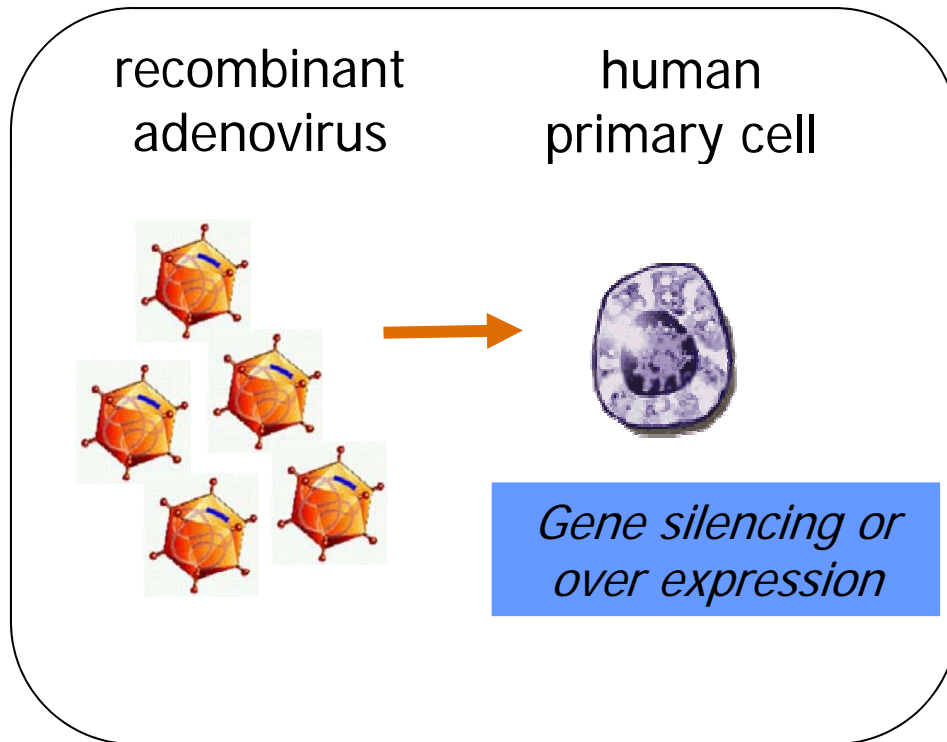
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Technology

Adenoviral technology

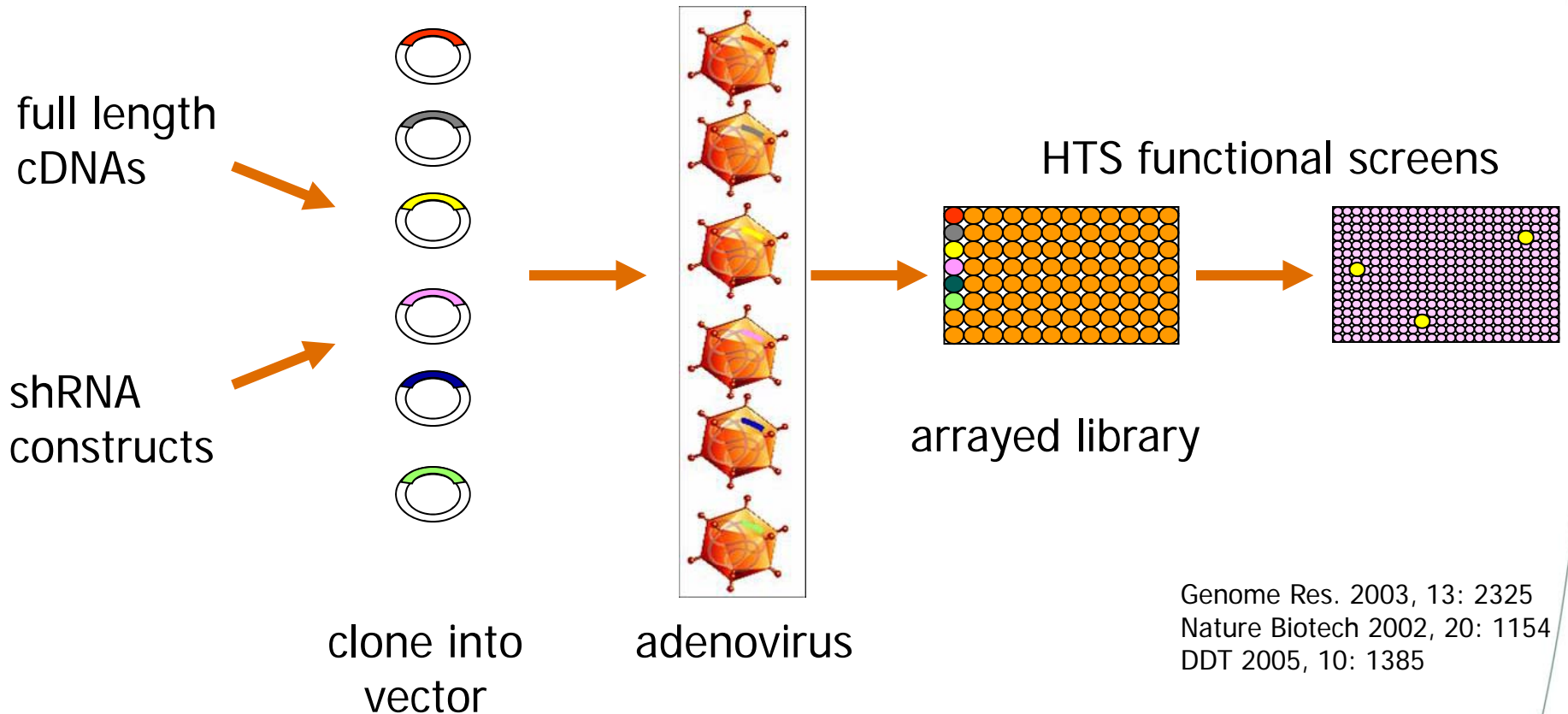


- Changes in cell health monitored via functional readouts
- 20-25 validated targets per screen
- IP on target and compound



Technology

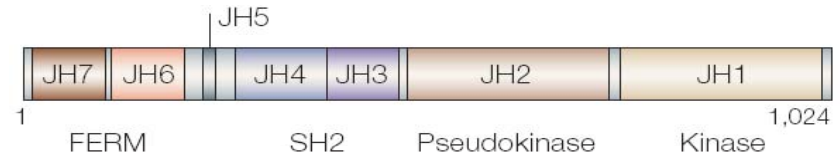
Arrayed adenoviral libraries for KI and KD



Genome Res. 2003, 13: 2325
Nature Biotech 2002, 20: 1154
DDT 2005, 10: 1385

JAK1 was identified using this technology

JAK family

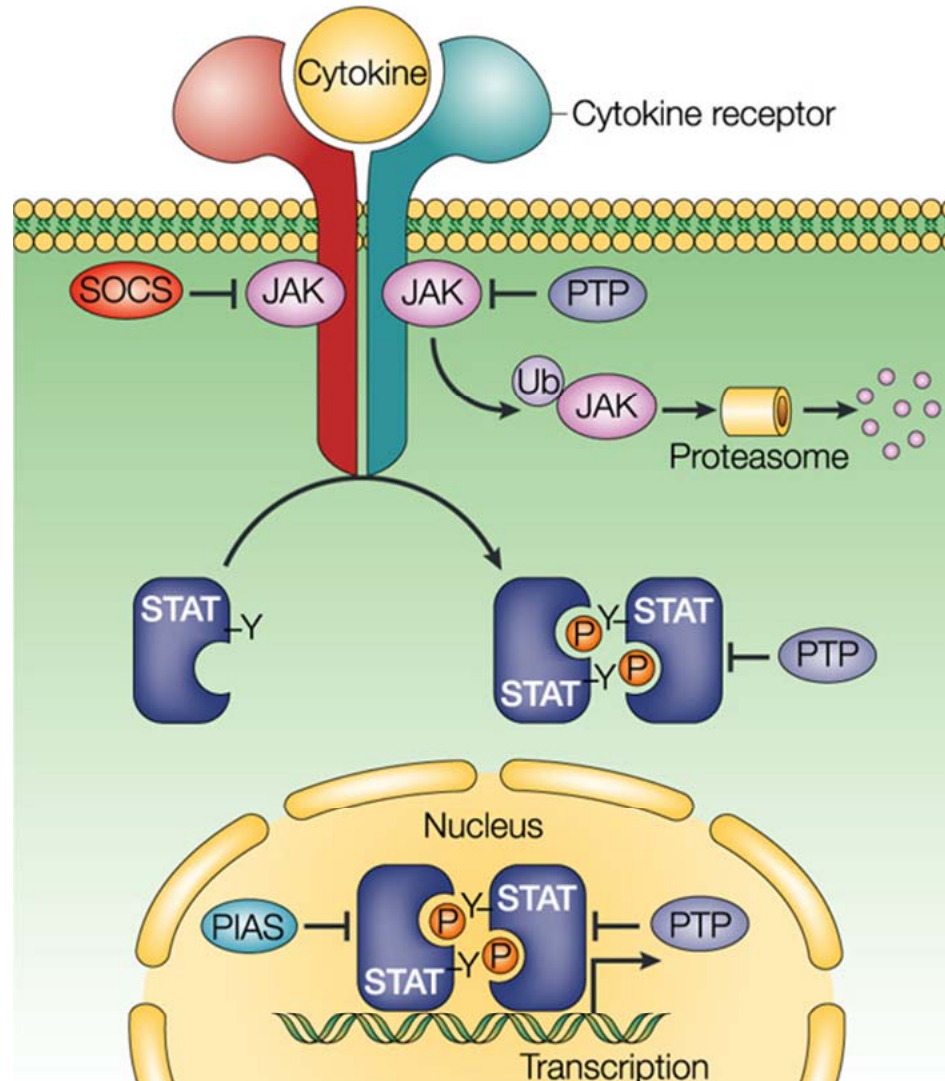


O'Shea JJ et al., 2004; Nat Rev Drug Discov 3, 555

- 4 family members: JAK1, JAK2, JAK3, TYK2
- Cytoplasmic tyrosine kinases
- Serve as intracellular signal transducers for many cytokines, hormones
 - interleukins, interferons, EPO, GH, OSM, LIF,...

JAK	Cytokines	Phenotype of mouse knockout
JAK1	Gp130 cytokine, type I IFN, IFN- γ , and β c cytokines, γ c cytokines	Perinatally lethal; neurological defects and SCID
JAK2	EPO, TPO, PRL, GH, IFN- γ and IL-12	Embryonically lethal; defective erythropoiesis
JAK3	γ c cytokines	SCID
TYK2	Gp130 cytokines, type I IFNs, IL-12 and IL-23	Modest viral susceptibility, reduced IL-12 response and resistance to arthritis induction

JAK-STAT signalling



JAK inhibitors in development for RA

Three JAK inhibitors have shown clinical efficacy in RA

- rapid onset, 30-50% improvement in ACR20 over placebo
- *tofacitinib* and VX-509 administered twice-daily

RA clinical candidate	JAK inhibition profile	Phase
<i>tofacitinib</i>	JAK3>JAK1>JAK2	Filed
INCB28050 <i>baricitinib</i>	JAK1=JAK2	Phase II
VX-509	JAK3	Phase II

Different selectivity profile = opportunity to differentiate JAK inhibitors

Balancing safety and efficacy

Lessons from 24 weeks of *tofacitinib* in Phase II

	placebo	5 mg bid	10 mg bid	15 mg bid
N=	59	49	61	57
ACR20 (%)	25.4	51.0	65.6	66.7
ACR50 (%)	10.2	34.7	44.3	54.4
ACR70 (%)	6.8	20.4	37.7	33.3

tofacitinib 24-week Phase II study

- significant, dose-dependent improvements in ACR20/50/70 response rates¹
- dose selection (5 mg, 10 mg bid) for Phase III studies based on efficacy data and safety: incidence of (severe) anemia, at doses of 10 mg bid and higher²
- anemia is JAK2-driven side effect, apparent within 2 weeks¹

Potential to increase efficacy by minimizing JAK2 side effects

¹ Fleischmann et al/Kremer et al. ACR presentation (2009).
² Riese et al. Best Pract & Res Clin Rheum 24 (2010) 513-526.



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Hit finding overview

JAK1 biochemical assay

Primary screen: 9,510 compounds (10 μ M, single dose)
90%: focused kinase collection



Overall hit rate: 5.6%

Rescreen, D/R testing



161 actives

Spec panel – Cell tox



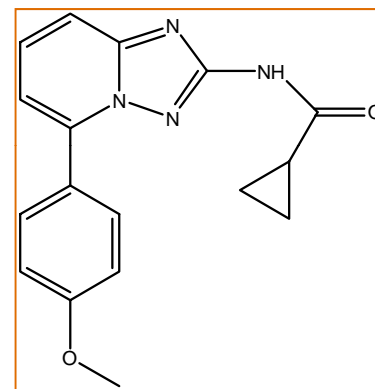
Cpd QC

JAK/STAT cellular assays



SAR identified > H2L

Best hit:



hJAK1 IC_{50} = 65 ± 18 nM

hJAK2 IC_{50} = 168 ± 7 nM

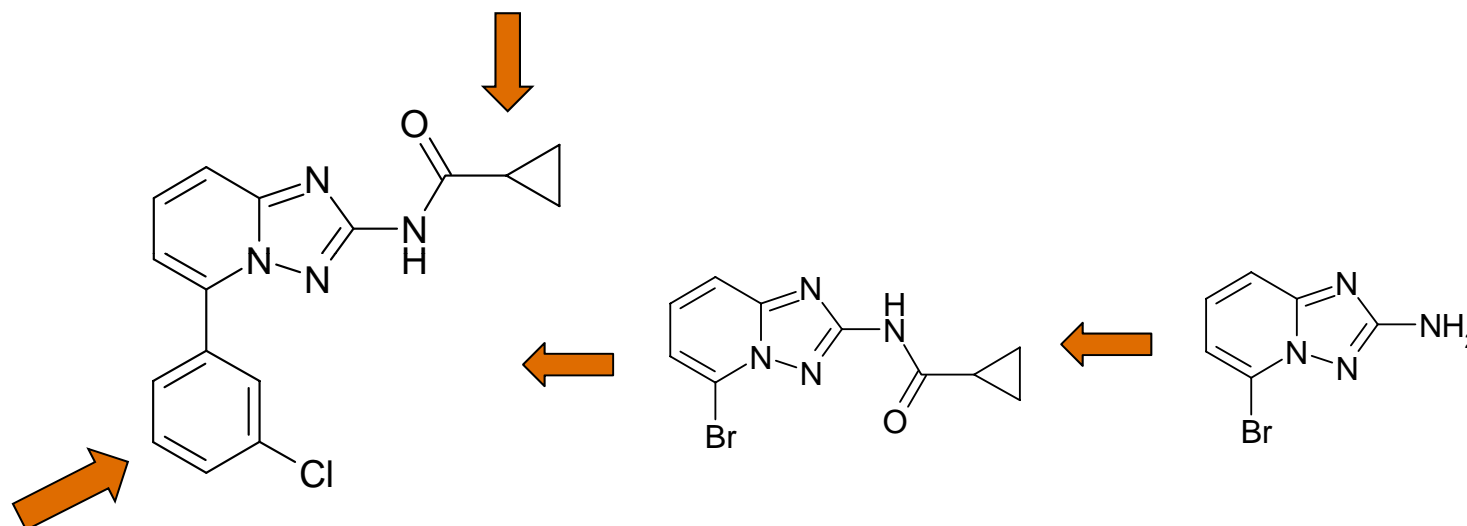
hJAK3 IC_{50} = 675 ± 174 nM

hTYK2 IC_{50} = 783 ± 148 nM

From H2L to LO

Hit

Investigation on
position 2

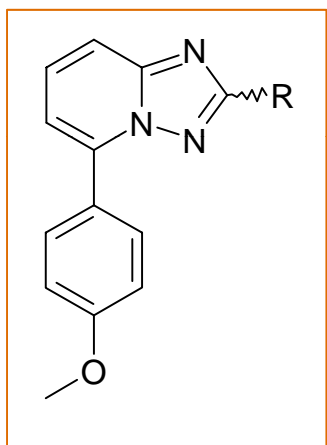


SAR of the phenyl
was developed

hJAK1 IC₅₀, 110 nM

Start at easy point, diversify to large variety of compounds
to understand the SAR of the series

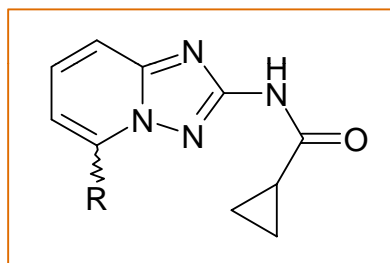
Exploration in position 2

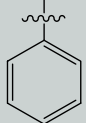
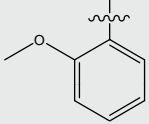
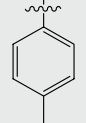
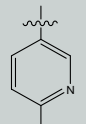


R	JAK1 IC ₅₀ (nM)	R	JAK1 IC ₅₀ (nM)
	> 10,000		5,740
	> 10,000		> 10,000
	> 10,000		2,270
	> 10,000		> 10,000

Replacement of the cyclopropyl-amide on the 2-position was not tolerated

Phenyl substitution improvement



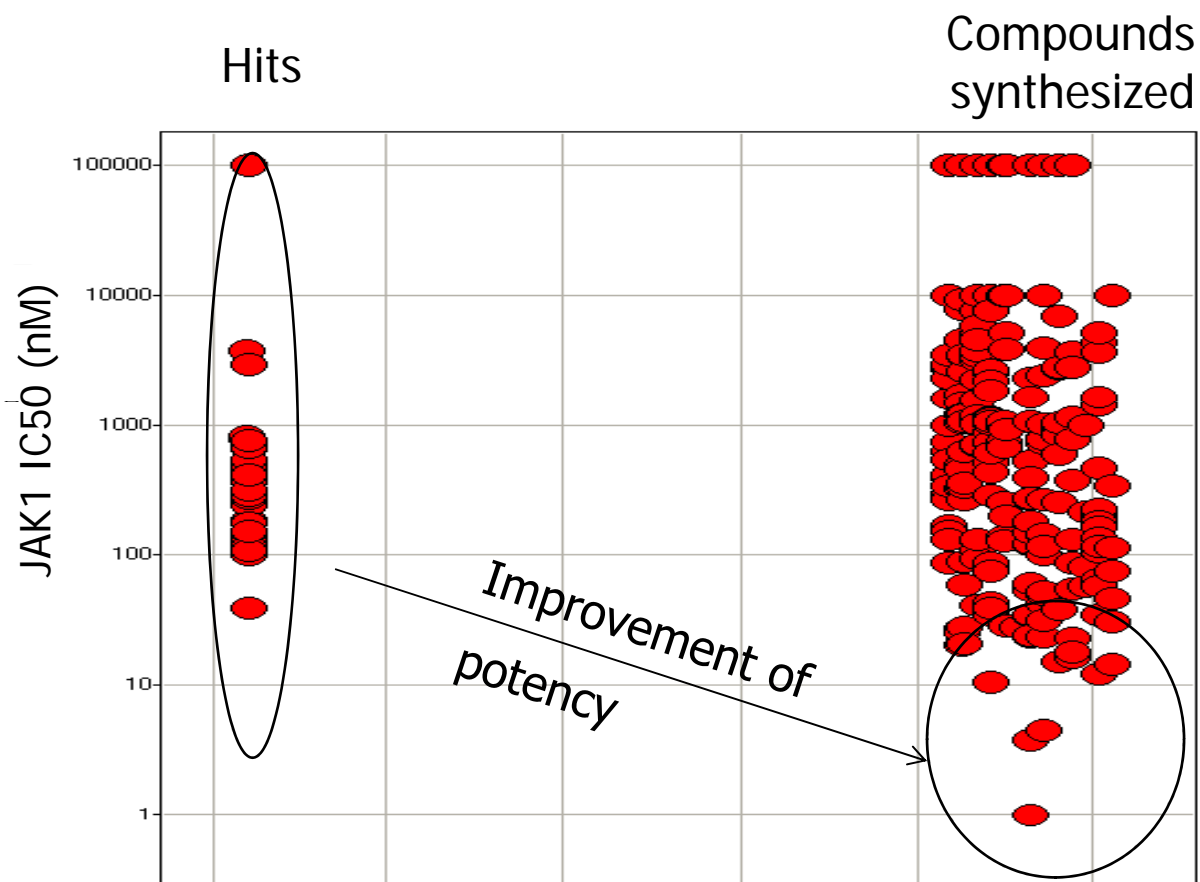
Substitution R	JAK1 IC ₅₀ (nM)	JAK2 IC ₅₀ (nM)	JAK3 IC ₅₀ (nM)	TYK2 IC ₅₀ (nM)
	180	564	1,790	1,767
	361	925	1,142	3,877
	110	188	1,155	587
	65	168	675	783
	528	980	2,857	7,049

The *para*-position of the phenyl was tolerant to wide range of substitutions



Lead optimisation

SAR

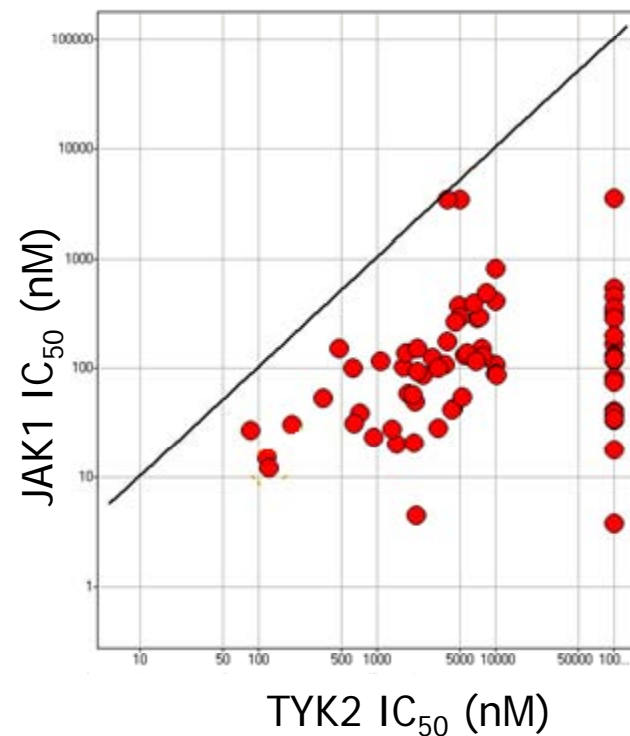
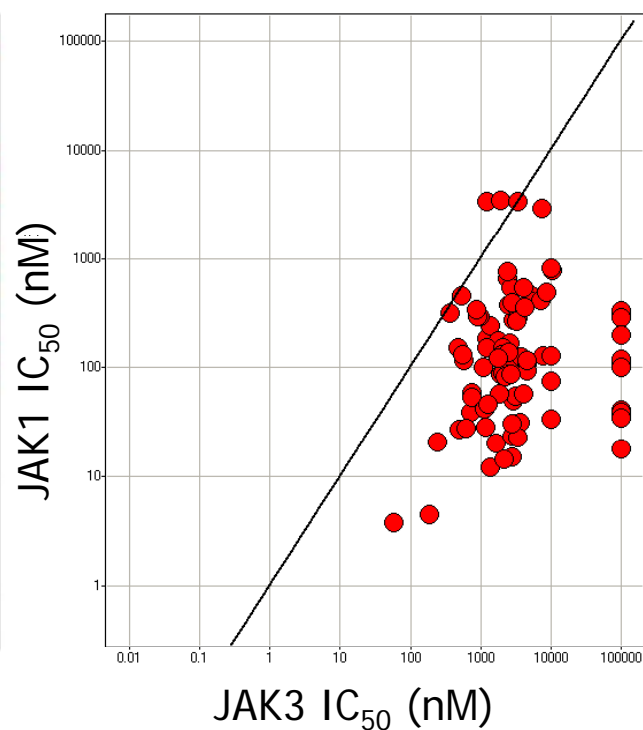
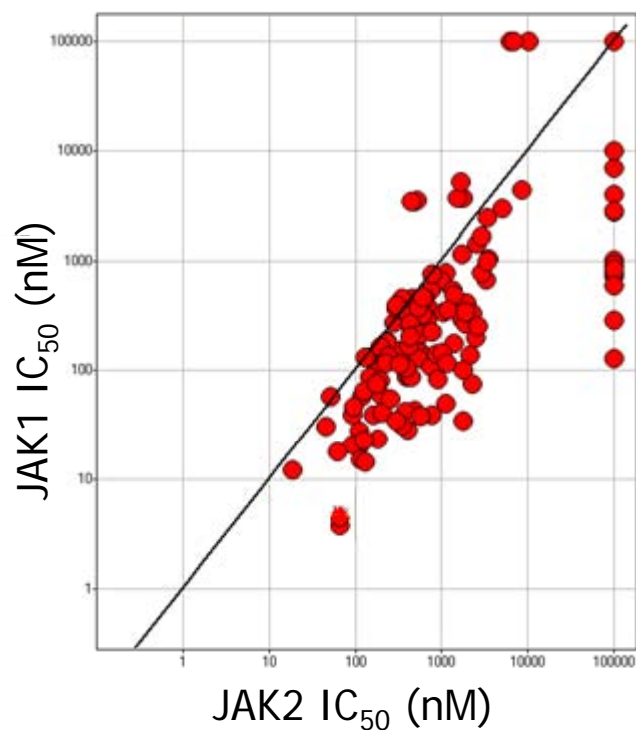


Drive towards potent JAK1 compounds



Lead optimisation

Biochemical selectivity

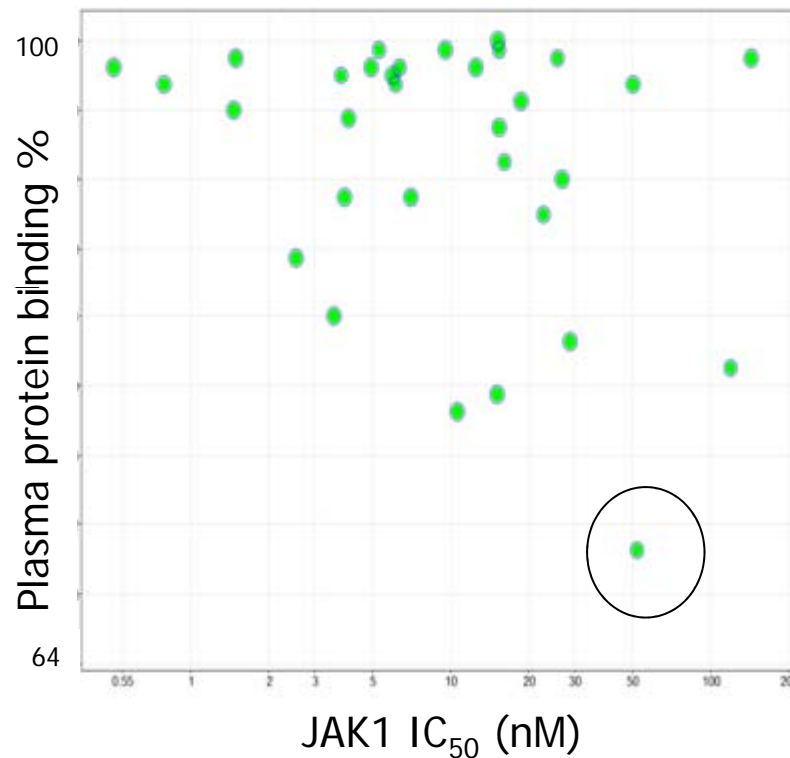
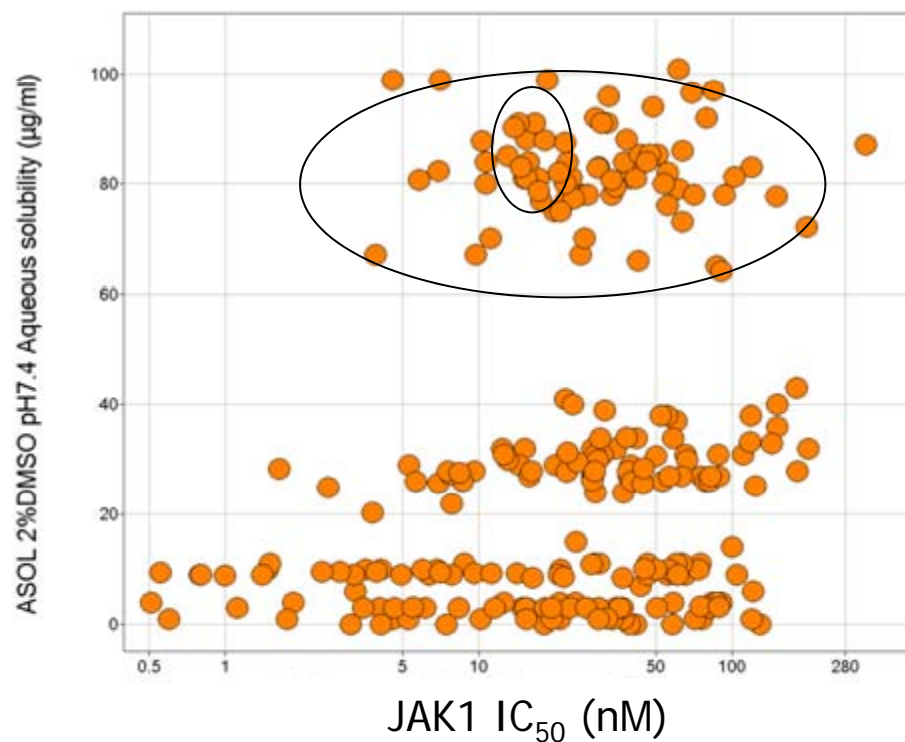


The series was made selective towards JAK1



Lead optimization

ADME analysis

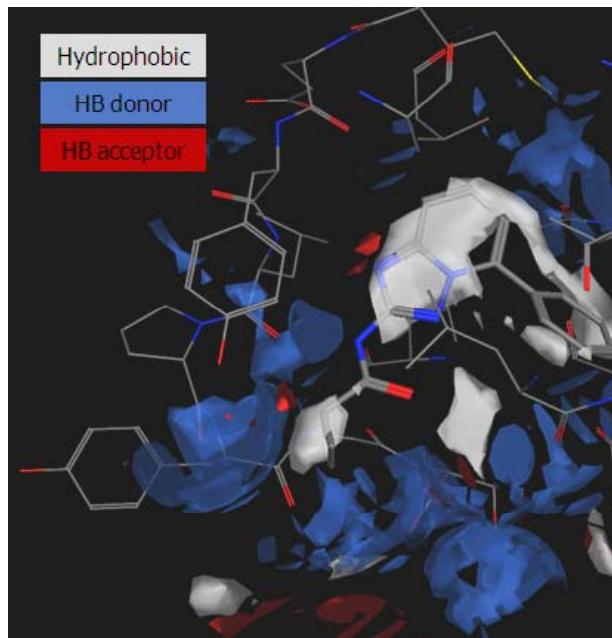
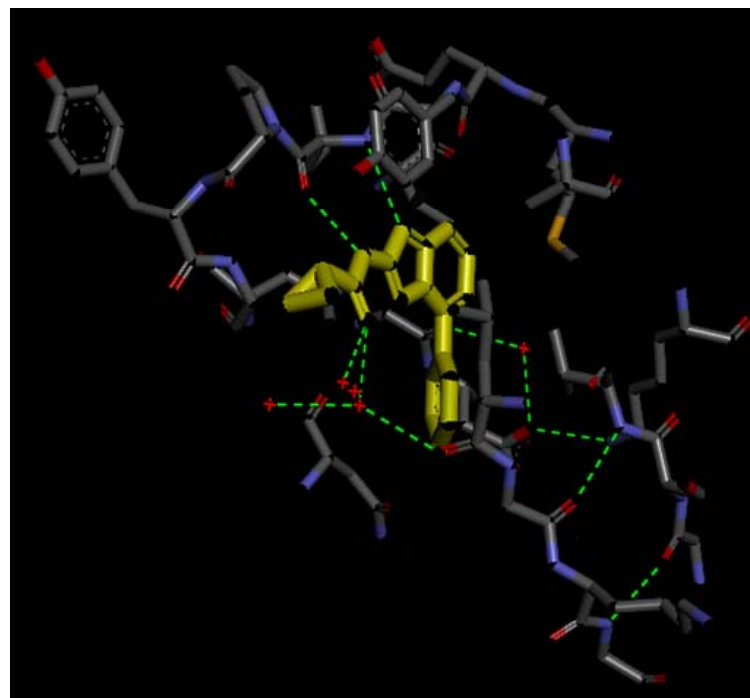


ADME analysis of main series led to sub-series: good solubility, low PPB
Further optimization resulted in GLPG0634

Crystal structure of JAK2

Triazolo-pyridine series docked in JAK2 crystal structure

Nitrogen atom of the scaffold and of cyclopropylamide of the series interact with the hinge



Cyclopropyl group locates in favorable hydrophobic pocket

GLPG0634 inhibits JAK1

JAK selectivity

Potencies of compounds in biochemical assays*

Compound	JAK1 IC ₅₀ , nM	JAK2 IC ₅₀ , nM	JAK3 IC ₅₀ , nM	TYK2 IC ₅₀ , nM
GLPG0634	10	28	810	116
<i>tofacitinib</i>	1.3	1.9	0.2	23
INCB28050	5.9	5.7	>400	53

* Biochemical assays by fluorescence read-out show higher potencies than prior radioactive assays.

JAK1 selectivity ratios of compounds in biochemical assays

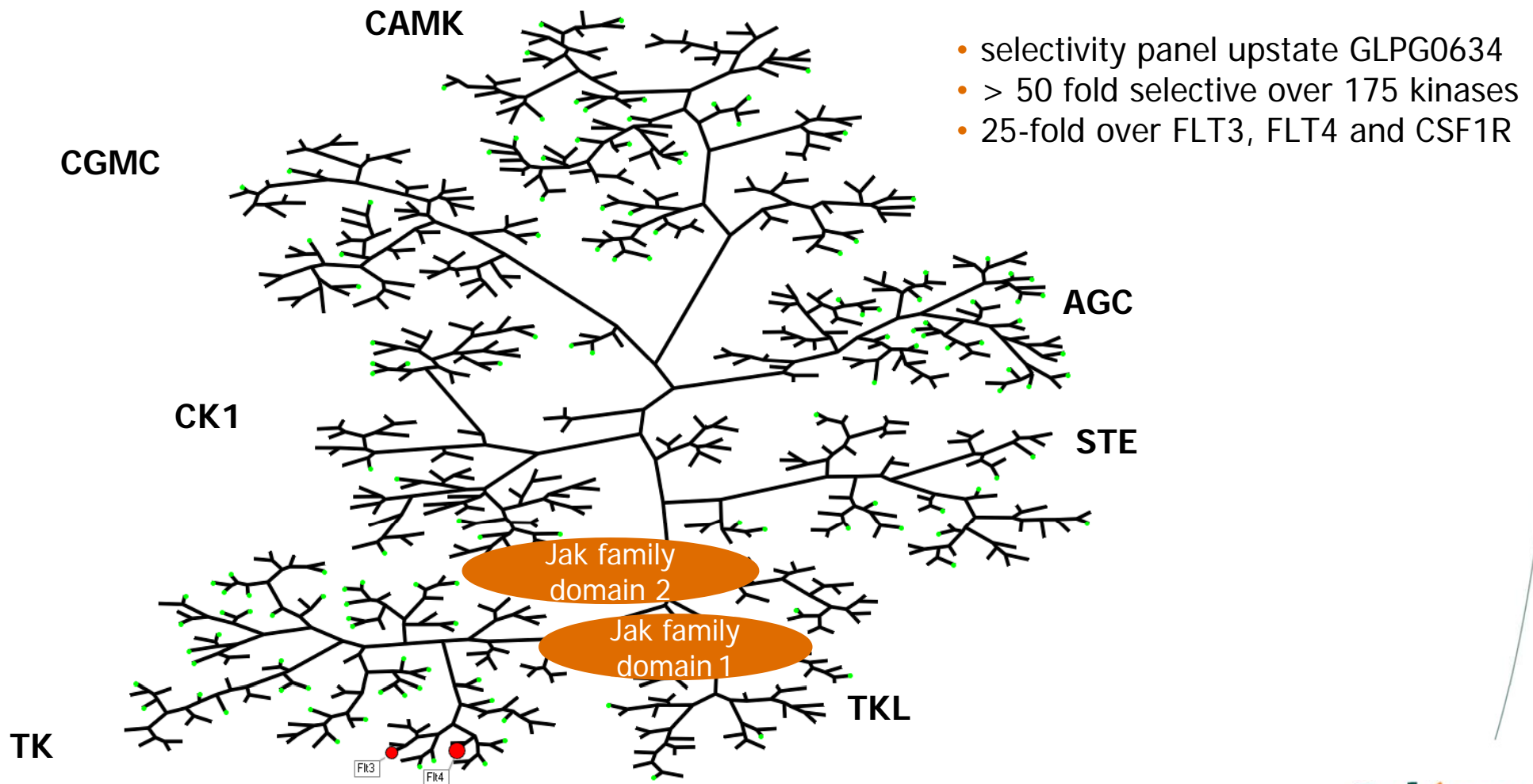
Compound	JAK2/JAK1 ratio	JAK3/JAK1 ratio	TYK2/JAK1 ratio
GLPG0634	2.8	81	11.6
<i>tofacitinib</i>	1.5	0.2	17.7
INCB28050	1.0	60	9.0

GLPG0634 shows good selectivity over JAK3 and TYK2



GLPG0634 inhibits JAK1

High selectivity towards 150 kinase-panel



GLPG0634 inhibits JAK1

High selectivity for JAK1 over JAK2 in cellular assays

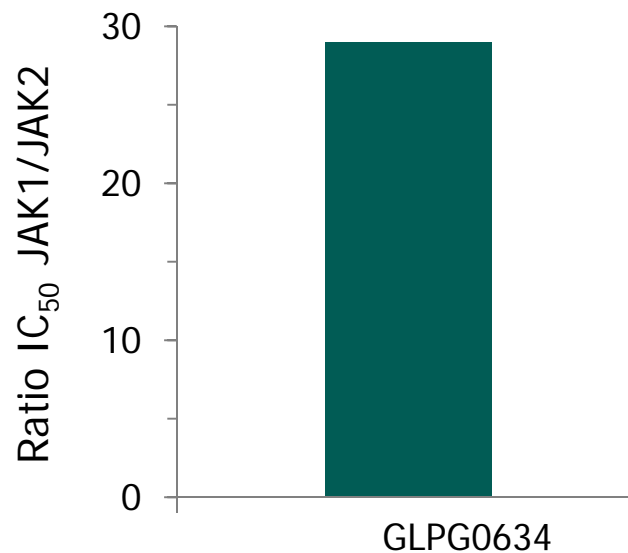
JAKs involved	Cell type	Trigger	Read-out	pIC ₅₀ ± SEM	IC ₅₀ (nM)	n
JAK1-JAK3	THP-1	IL-4	pSTAT6	6.75 ± 0.06	154; 203	2
JAK1-JAK3	NK-92	IL-2	pSTAT5	6.46 ± 0.12	148; 757; 367	3
TYK2-JAK1	U2OS	IFNαB2	pSTAT1	6.33 ± 0.03	494;436	2
JAK1-JAK2	HeLa	OSM	STAT1 reporter	6.01 ± 0.07	1,045	4
JAK1-JAK2	U2OS	IFNγ	pSTAT1	5.45	3,364	1
JAK2	TF-1	IL-3	pSTAT5	5.45	3,524	1
JAK2	BaF3	IL-3	proliferation	5.34 ± 0.04	4,546	3
JAK2	UT7-EPO	EPO	pSTAT5	>5	>10,000	2
JAK2	22Rv1	PRL	pSTAT5	>5	>10,000	2

GLPG0634 inhibits JAK1

High selectivity for JAK1 over JAK2 in human blood

Preclinical JAK profiling in human whole blood assay

Selectivity for JAK1 over JAK2
(ratio IC_{50} values)



	Assay	IC ₅₀ (nM)
JAK1	IL6/pSTAT1	600
JAK2	GM-CSF/pSTAT5	17,500

rhIL-6: 10 ng/mL; pSTAT1 in CD4⁺ leucocytes by FACS
rhGM-CSF: 20 pg/mL; pSTAT5 in CD33⁺ leucocytes

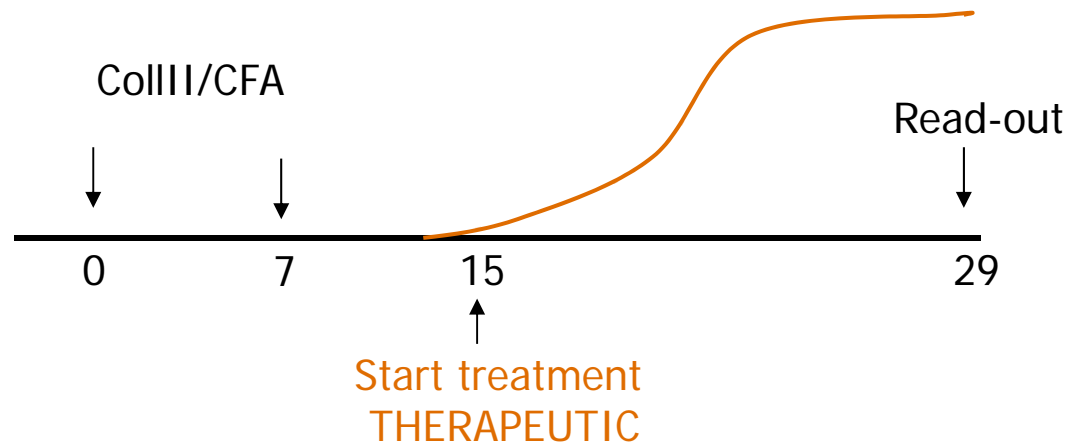
Animal pharmacokinetics for GLPG0634

Vehicle MC 0.5% (v/v)		C_{\max} (ng/mL)	T_{\max} (h)	AUC_{0-24h} (ng.h/mL)	$T_{1/2}$ (h)	Cl (L/h/kg)	V_{ss} (L/kg)	F (%)
rat	IV 1 mg/kg	1,407		739	1.6	1.4	1.8	
	PO 5 mg/kg	310	2.2	1,681	3.9			45
dog	IV 1 mg/kg	1,143		4,098	7.5	0.25	1.7	
	PO 5 mg/kg	1,807	1.5	13,908	5.2			67

GLPG0634 was well exposed in rodent and non-rodent species using 0.5% methylcellulose as vehicle

Collagen-induced arthritis rat model

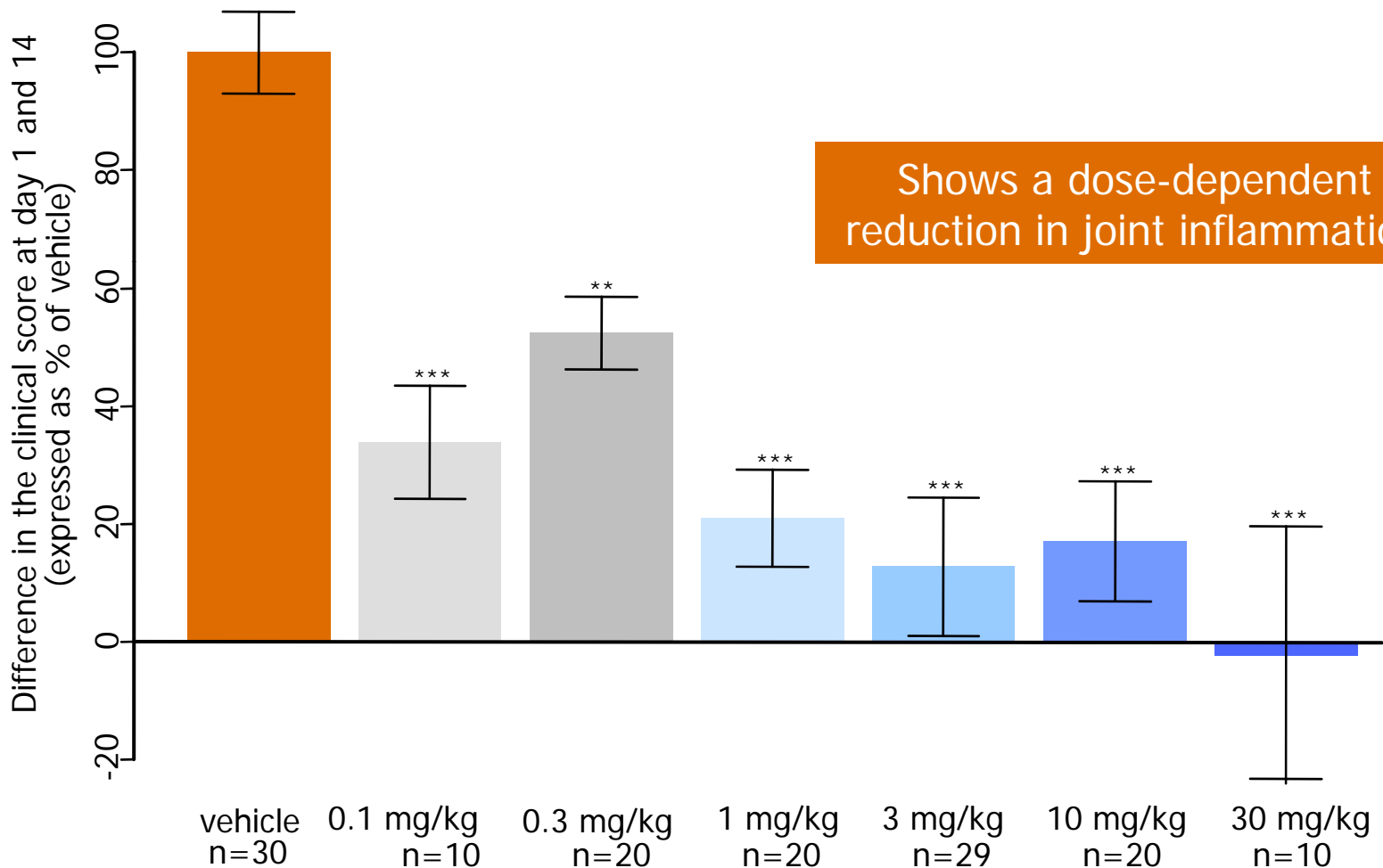
- Injection of heterologous type II collagen in susceptible rat strain
- Boost injection with Coll II at day 0 and 7
- Treatment day 15
- Read-out until day 29





Therapeutic CIA rat model

GLPG0634



Conclusion lead optimization

- GLPG0634 is a selective JAK1 inhibitor
 - JAK1 biochemical potency $IC_{50} \sim 10$ nM
 - human whole blood assay and cellular models show selectivity for JAK1 over JAK2
- Highly potent in therapeutic CIA animal model



GLPG0634

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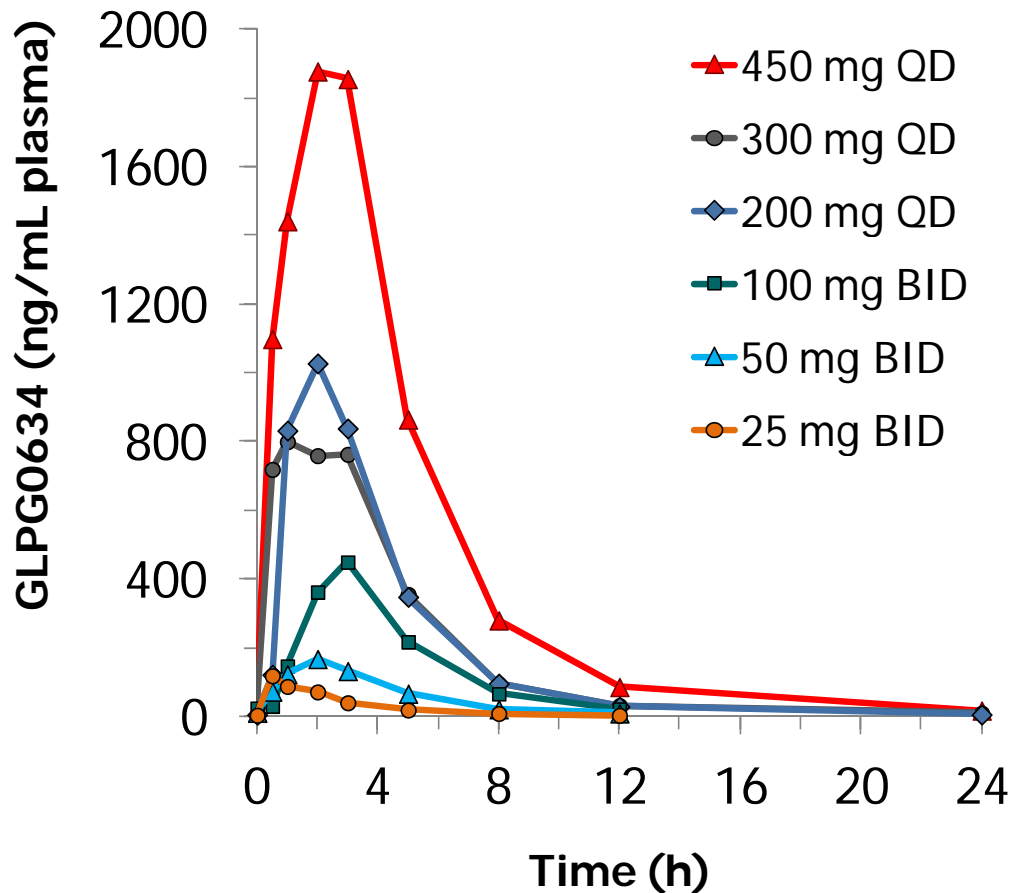
Phase I

Trial design and safety

- Ascending single dosing and Multiple dosing
 - 48 healthy volunteers: 6 subjects per groups received GLPG0634 and 2 placebo
- Safety: adverse events were mild and transient in nature.
 - headaches and abdominal discomfort (including loose stools) were reported in more than one subject, over all dose groups and including placebo
 - no changes in hematology parameters (including reticulocytes)
 - no changes in blood biochemistry (including cholesterol)
 - no signal in cardiovascular safety or vital signs

GLPG0634 clinical pharmacokinetics

Healthy volunteers

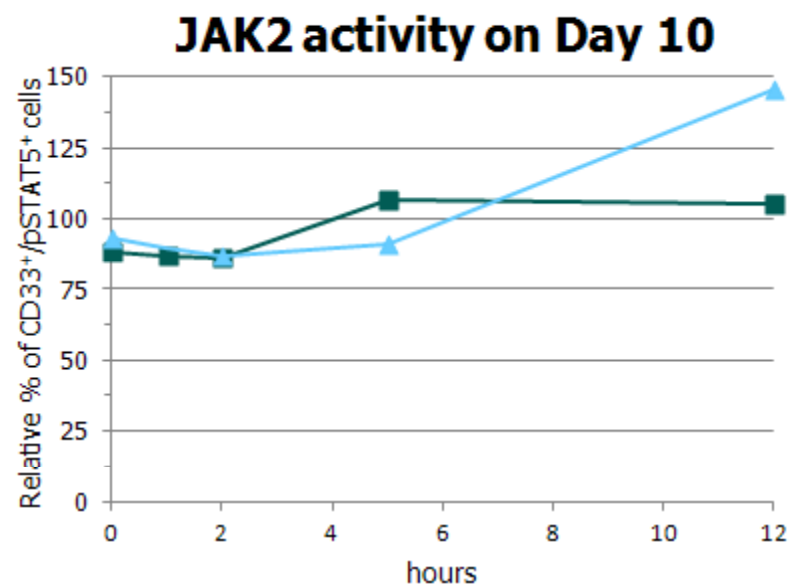
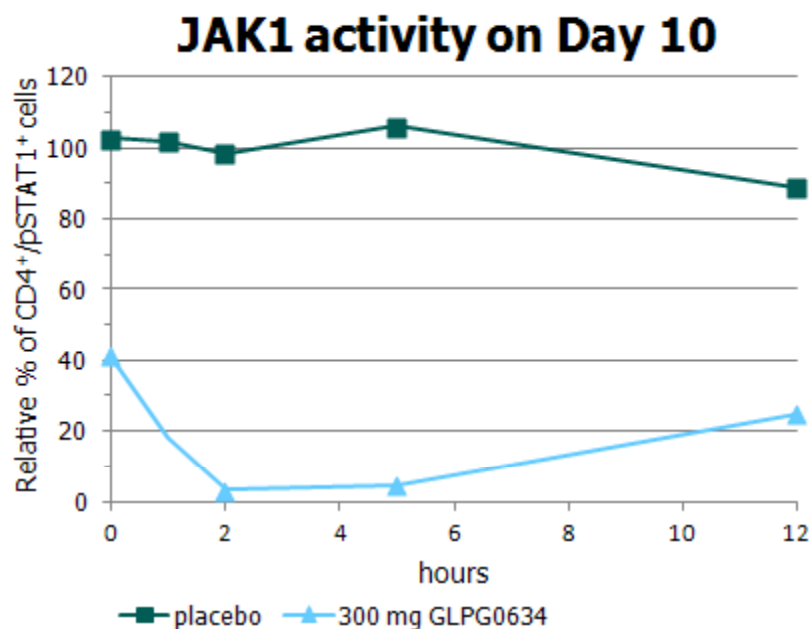


- Dose proportional PK
- Low variability (CV < 20%)
- Half life: 5-8 hours
- No food effect on capsule formulation
- Plasma exposure \geq 50 mg
 - exceeds effective exposure in rat CIA
 - exceeds cellular IC₅₀

GLPG0634 has a unique JAK profile

JAK1 and JAK2 measured in whole blood from Phase I healthy volunteers

- JAK1 (IL-6/pSTAT1) compared to JAK2 (GM-CSF/pSTAT5)



GLPG0634 is a selective JAK1 inhibitor



Conclusion Phase I

- GLPG0634 is well tolerated in the pharmacological active dose range, with no effects on hematology or other safety markers following 10 days dosing in healthy volunteers
- Good oral pharmacokinetics and biomarker PK/PD support a once-daily oral dosing regimen
- Results support the initiation of a Phase II trial in rheumatoid arthritis patients



GLPG0634

The 1st selective JAK1 inhibitor

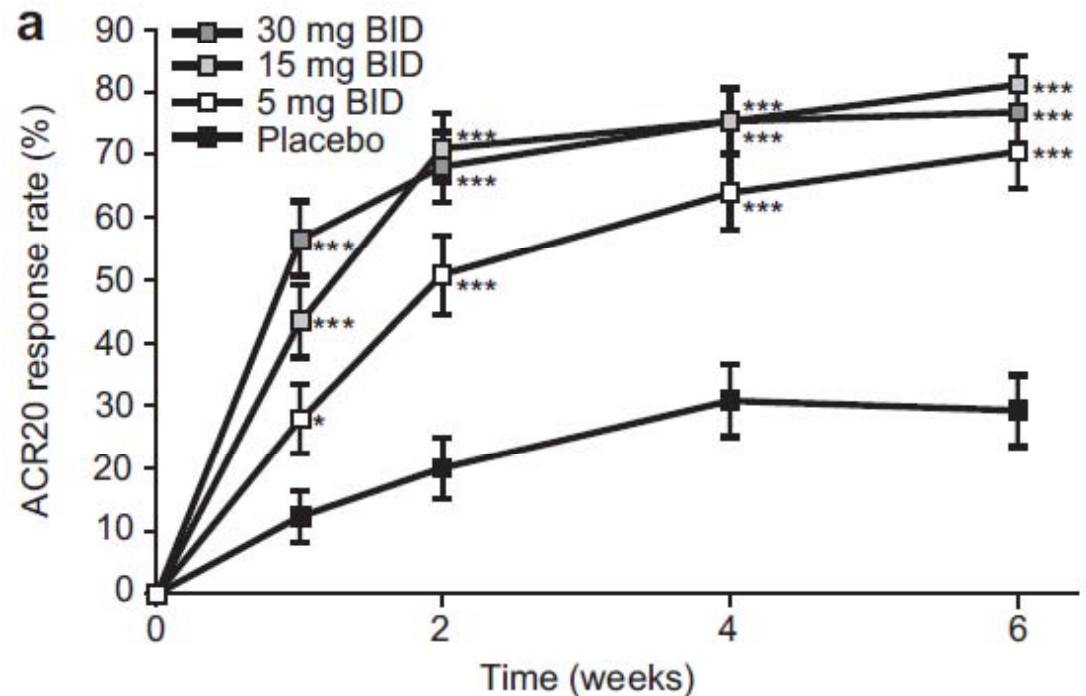
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Phase II: Why only a 4 week trial?

tofacitinib monotherapy in active RA

- Rheumatoid arthritis patients failing prior DMARD (n=264)
- Dose dependent efficacy
 - short-term efficacy (4 weeks) is maintained long-term (2 year)
- Safety and tolerability
 - infections
 - lipid elevations
 - transaminase increased
 - anemia
 - neutropenia





GLPG0634 Phase II PoC

Trial design

- Randomized, double-blind, placebo-controlled study in Moldova
- 36 RA patients with insufficient response to MTX, naïve to biologics
 - 4 week treatment, oral dosing
 - 200 mg QD *vs.* 100 mg BID *vs.* placebo
 - all on MTX (mean: 12 mg/week), with stable low-dose steroids/NSAIDs
 - patients randomized to 12 per group
 - similar demographics (mean age 49 years, 11 females per group)
- All 36 patients completed 4 weeks of treatment

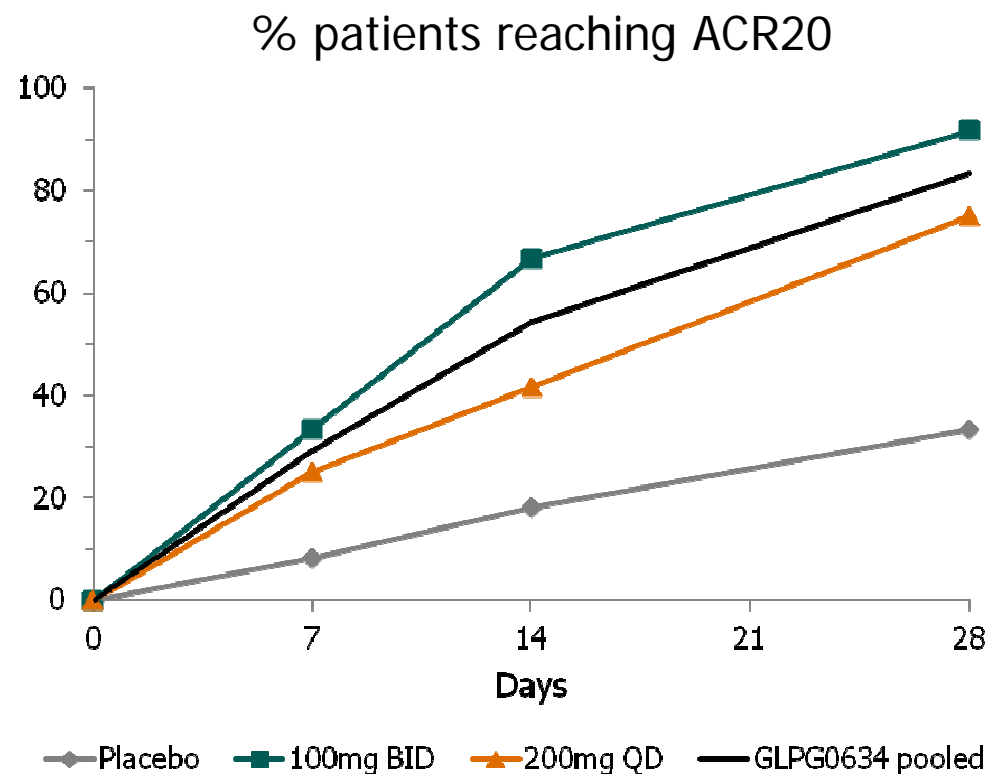
Designed to give rapid evaluation of efficacy at high dose

Baseline patient characteristics

	Placebo n=12	GLPG0634 100 mg BID n=12	GLPG0634 200 mg QD n=12
RA diagnosis (years)	5.6	9.7	7.5
Use of steroids	2	4	4
Use of NSAIDS	11	10	6
CRP at baseline (mg/L)	34.9	21.3	40.5
DAS28	6.3	6.7	6.4

GLPG0634 efficacy: ACR20

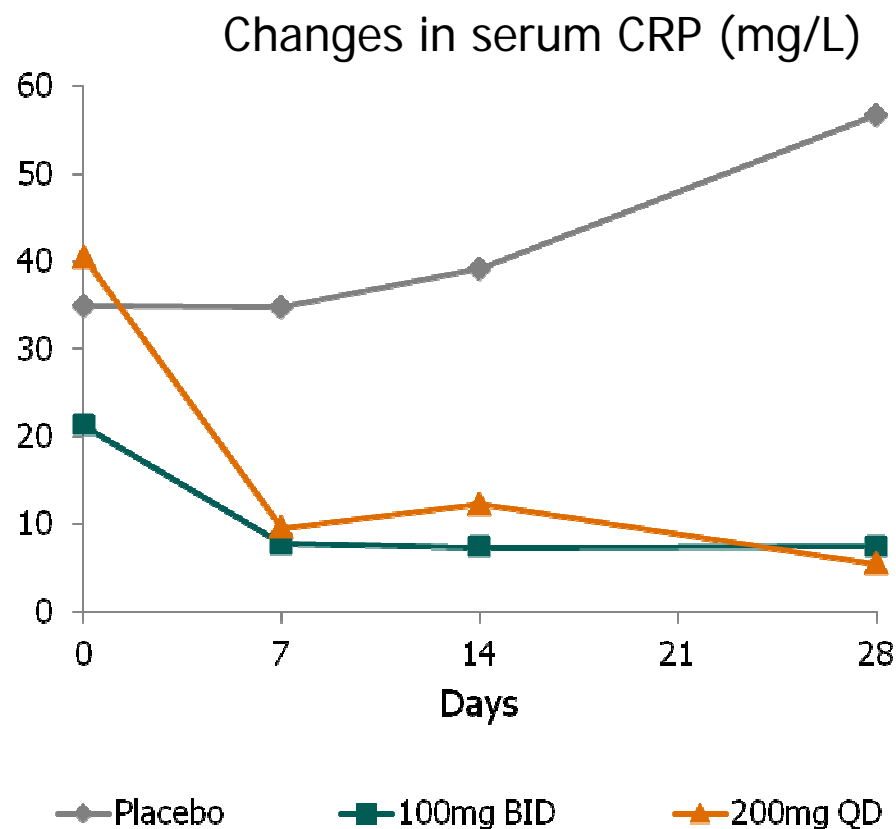
- Achieved primary endpoint
- ACR20 scores at Day 28: 42-58% improvement over placebo



GLPG0634 is highly efficacious with rapid onset of action

GLPG0634 efficacy: C-reactive protein

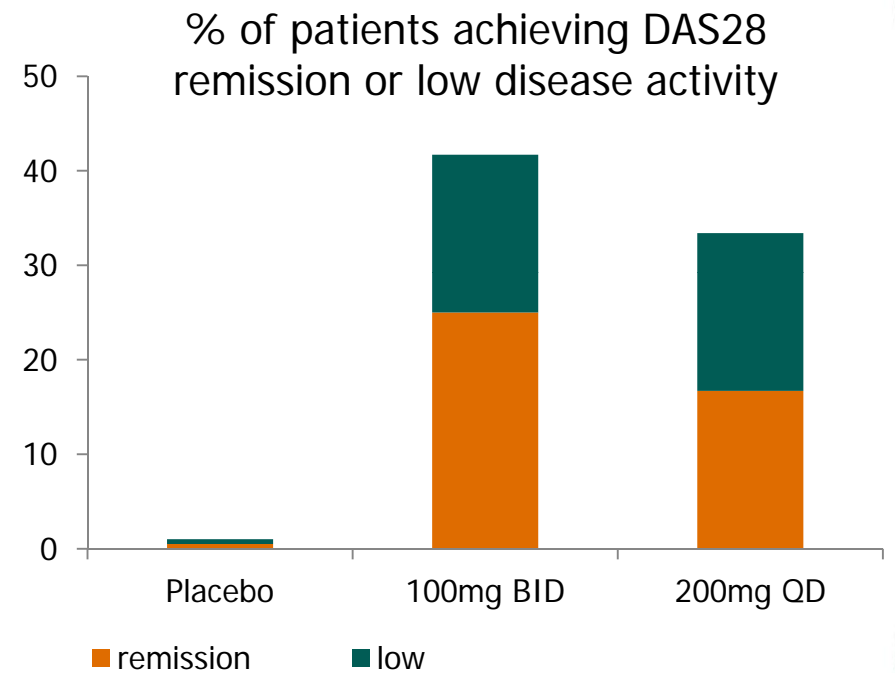
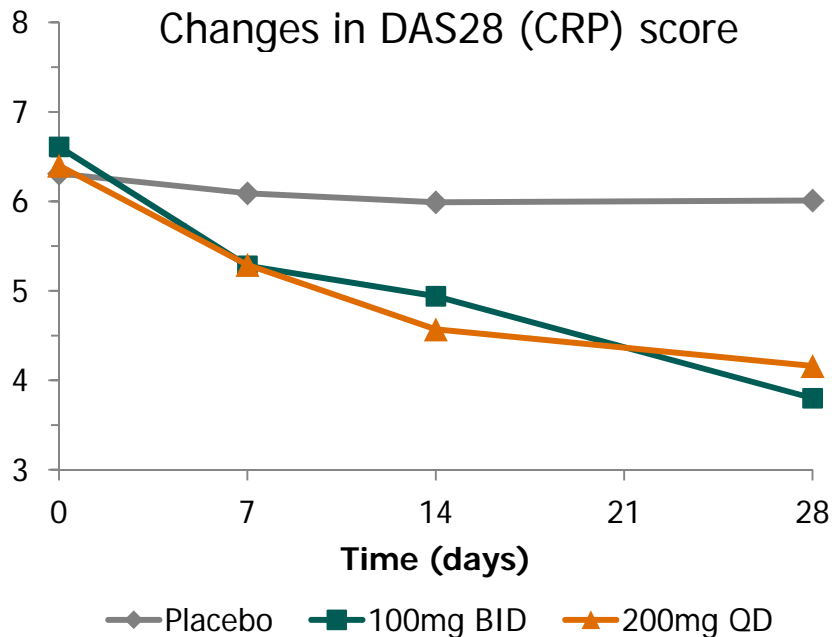
- CRP: inflammation biomarker
- GLPG0634 treatment induces a rapid and lasting decrease in serum CRP to near-normal levels



GLPG0634 is highly efficacious with rapid onset of action



GLPG0634 efficacy DAS28

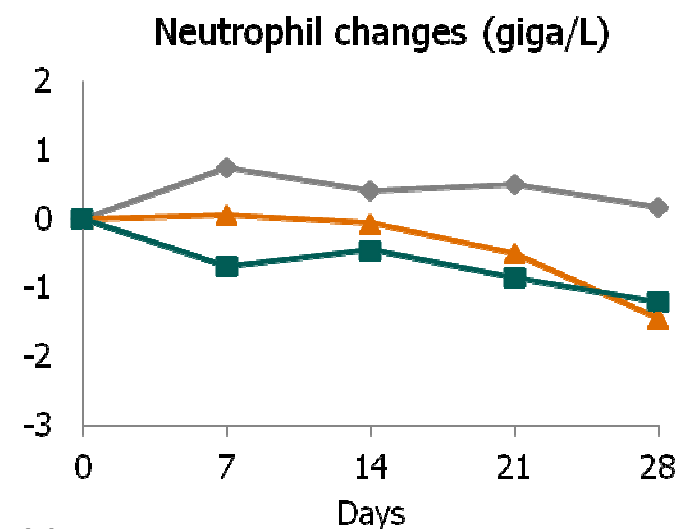
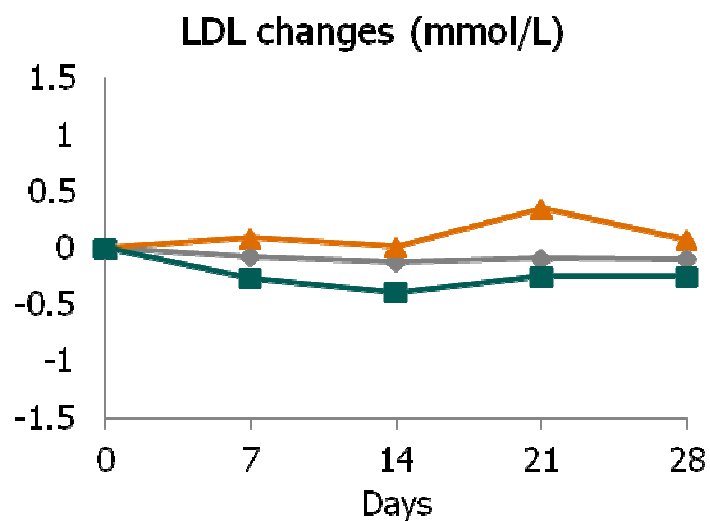
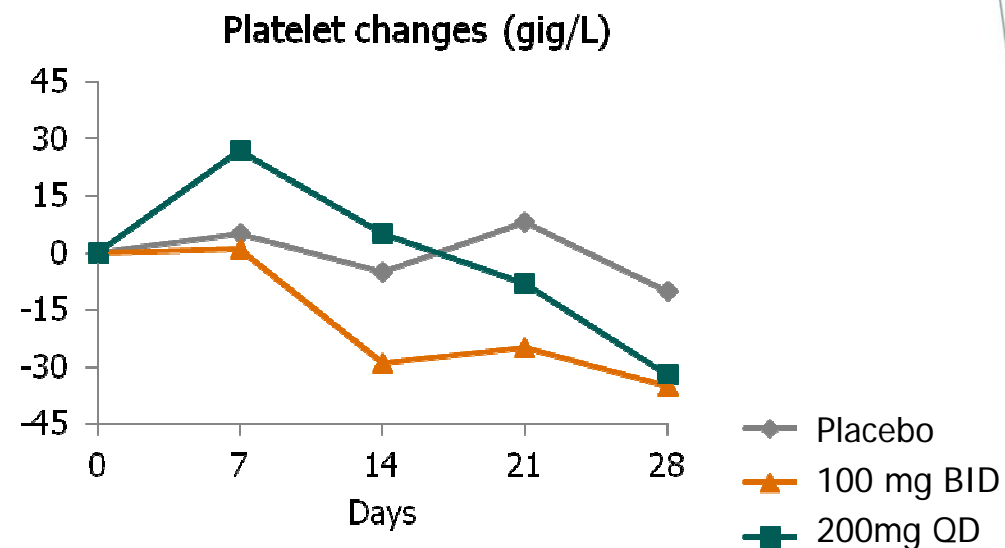
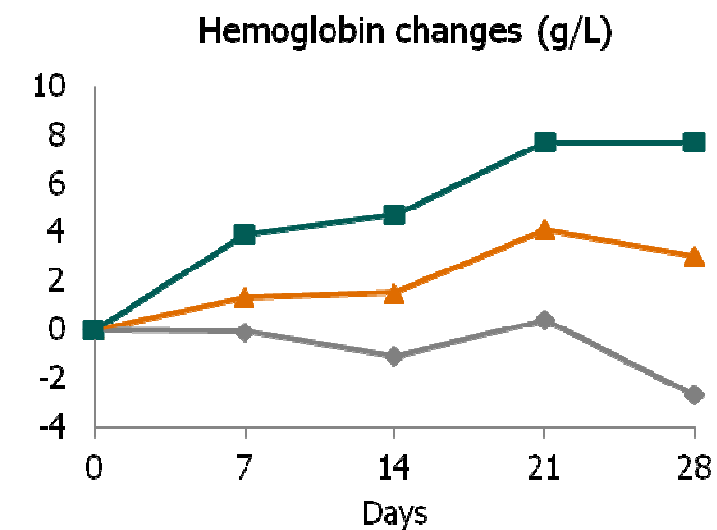


GLPG0634 is highly efficacious with rapid onset of action

GLPG0634 safety findings

Any treatment-related AE	Placebo n=12	GLPG0634 100 mg BID n=12	GLPG0634 200 mg QD n=12
None	8	10	9
Nausea		2	2
Abdominal discomfort			1
Abdominal pain		1	
Asthenia (weakness)	2		
Fatigue	1		
Dysgeusia (abnormal taste)			1
Headache	1	1	
Somnolence (drowsiness)			1

GLPG0634 safety



GLPG0634 safety summary

- Safe and well-tolerated
 - no SAEs on GLPG0634 treatment
 - few patients reported side-effects
 - neither anemia nor increase in LDL
 - modest decrease in neutrophils and platelets
 - no effects on blood pressure



Conclusion

GLPG0634 a potential best in class

- Hit finding to PCC
 - Triazolopyridine identified as JAK1 inhibitors by HTS screening
 - Identification of subseries that offer a balance of ADME properties and potency
- GLPG0634 has a unique profile
 - a selective JAK1 inhibitor in biological systems
 - active in preclinical models of arthritis
 - well tolerated in a wide dose range in Phase I
 - PK/PD profile consistent with once daily dosing
- Proof-of-Concept in rheumatoid arthritis patients achieved
 - 4 weeks treatment at 200 mg/day on top of failing MTX



THANK YOU

Questions?