

NELLE SINDROMI LINFOPROLIFERATIVE:

inarrestabile dinamicità

Zanubrutinib è di seconda o terza generazione?

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ROMA

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UNAHOTELS Decò

Disclosures

Company name	Research support	Employee	Consultant	Stockholder	Speakers bureau	Advisory board	Other
MSD			Х		Х		
Eisai			X		X	X	
AstraZeneca	Х		X		X	Х	
BeiGene					X		
Janssen	Х		X		X		
Novartis			X		X		
Lilly			X		X		
Incyte			X		X		
AB Science			X				

Someone has already given an answer

EXPERT REVIEW OF CLINICAL PHARMACOLOGY 2021, VOL. 14, NO. 11, 1329–1344 https://doi.org/10.1080/17512433.2021.1978288



DRUG PROFILE





Clinical pharmacology and PK/PD translation of the second-generation Bruton's tyrosine kinase inhibitor, zanubrutinib

Constantine S. Tam oa,b,c,d, Ying C. Oue, Judith Trotmanf,g and Stephen Opath,i

The challenges of increasing the generation

Pharmacodynamics

Kinase profiling at concentrations of $100 \times IC_{50}$ based on BTK IC_{50}

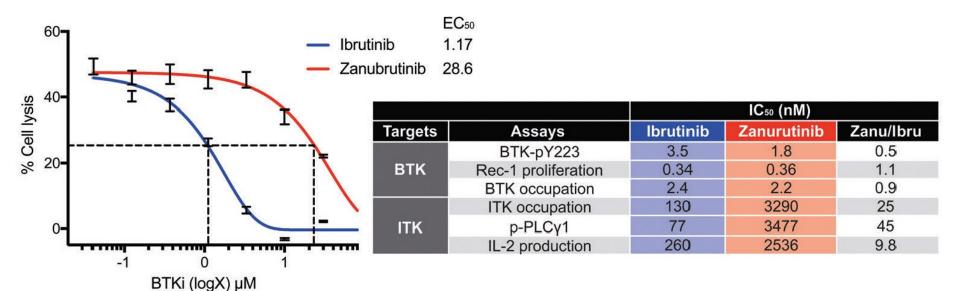
Targets with >50% inhibition are highlighted in red

Zanubrutinib Ibrutinib 71 nM 32 nM BLK 99.9 BLK 100.2 ERBB4/HER4 99.1 BMX/ETK TXK 98.5 ERBB4/HER4 99.5 BMX/ETK TXK 98.1 98.8 BTK TEC 95.1 98 TEC **BTK** 79.3 97.2 BRK **FGR** 63.9 95.7 FGR YES/YES1 53.1 92.9 **EGFR** 43.3 LCK 91.2 LCK 40.6 ITK 84.3 YES/YES1 37.1 HCK 93 CSK 28.8 CSK 81 13 STK33 23.7 76.5 **EGFR** 14 BMPR2 22.6 FYN 66.9 15 AXL 22.4 ERBB2/HER2 61.9 16 HCK 21.9 SRMS 61 17 PKCd 20.9 JAK3 58.7 18 FLT3 20.5 LYN 52.3 MEKK1 20.1 46.1 c-Src ITK 19.1 FLT3 41.8 MSK2/RPS6KA4 19 BRK 41.6 ERN1/IRE1 17.9 ABL2/ARG 40.4 MNK2 17.8 WNK1 32.5 FRK/PTK5 17.8 MNK2 32.4

Tam CS et al. Blood Cancer Journal 2023:13:141

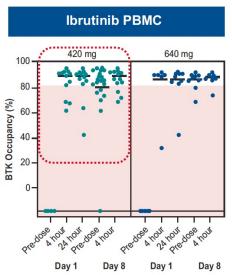
Zanubrutinib spares NK effector function

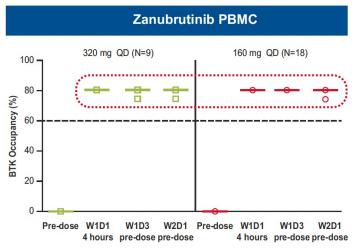
Mino MCL cells and NK92MI cells were co-seeded and treated with vehicle or various concentrations of BTK inhibitors

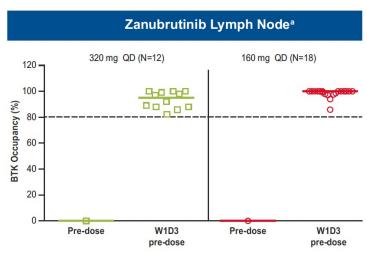


Thijs W.H. Flinsenberg et al. Haematologica 2020; 105:e76

Zanubrutinib BTK occupancy in PBMC and in lymph nodes by dose regimens relative to those of ibrutinib







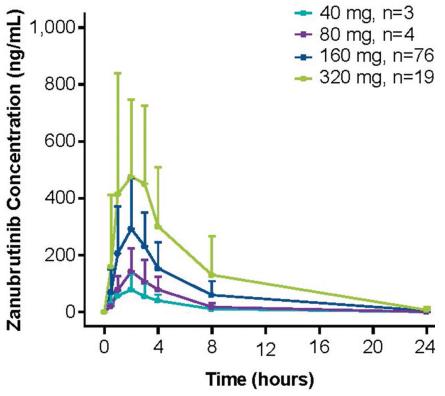
The challenges of increasing the generation

Pharmacokinetics

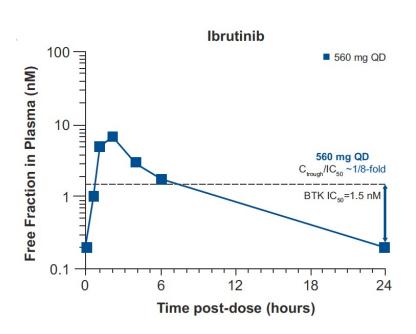
Pharmacokinetic characteristics

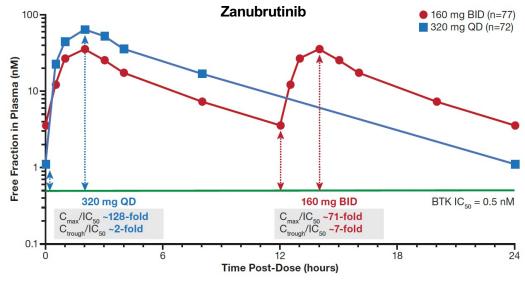
- Zanubrutinib PK properties were unaffected by factors including renal (estimated glomerular filtration rate ≥30 mL/min) and mild/moderate hepatic impairment (Child-Pugh class A or B)
- With appropriate dose reductions, it could be administered with moderate or strong CYP3A inhibitors.
- Zanubrutinib can be administered concurrently with proton pump inhibitors (PPI)/acid-reducing agents without restriction.
- Zanubrutinib has high volume of distribution (approximately 880 L), high AUC/IC50, and half-life of 2-4 h.
- Pharmacokinetics is not saturable

Dose-proportional increase in drug levels



Pharmacokinetics and AUIC of ibrutinib and zanubrutinib

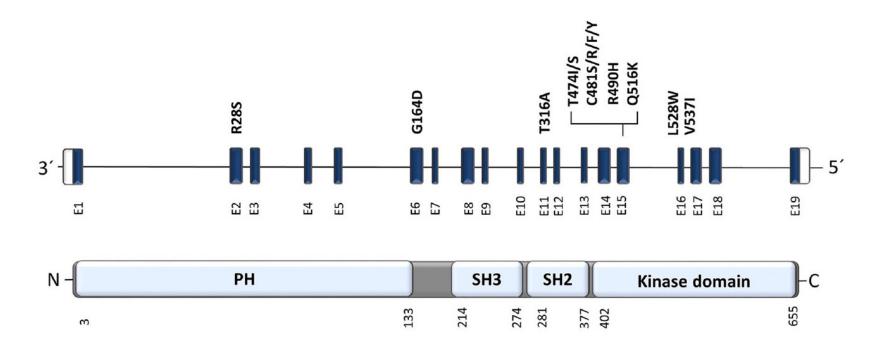




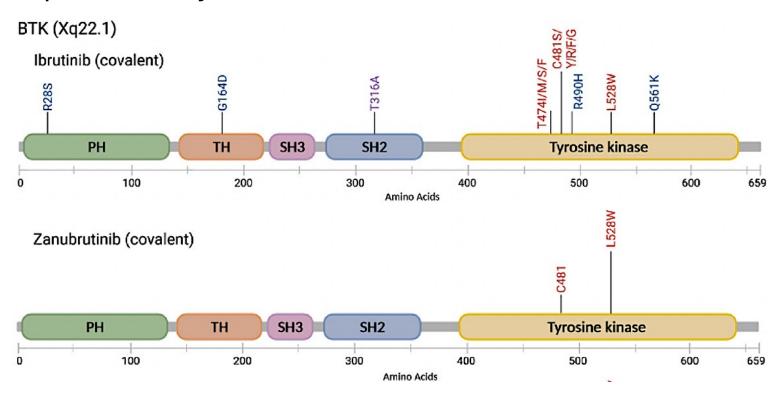
Resistance mutations

Do they really matter?

BTK resistance mutations



Map of clinically documented BTK mutations



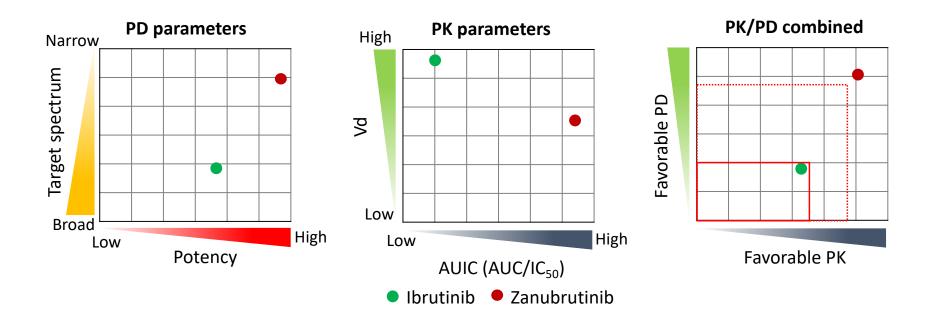
BTK mutations detected in a cohort of patients with disease progression during BTKi treatment

	Number of patients carrying the mutations				
	Ibrutinib-treated patients (n = 24)	Zanubrutinib-treated patients (n =13)	Total	P	
Cys481 codon mutations	24	10	34	.03	
Leu528Trp	1	7	8	.001	

Final considerations

Multiparametric evaluation

PK and PD combined: beyond the boundaries of the second generation?



Conclusions

- Zanubrutinib is a BTK inhibitor with high selectivity and potency.
- First generation BTKi suppressed NK-cell cytotoxicity, most likely due to off-target inhibition of ITK, while zanubrutinib spares NK activity.
- Zanubrutinib has favorable pharmacokinetics.
- Multiparametric pharmacologic assessment suggests that zanubrutinib challenges the limit of second generation BTKi.