

## De-risking Strategies of Pancreatic Effects Induced by GI181771X, a Novel Cholecystokinin-1 Receptor Agonist for Obesity Indication

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- GI181771X (771) Background
- 771-Related pancreatic changes
  - **Molecular mechanism** of pancreatic responses
  - Species differences (rodents & nonhuman primates)
  - Clinical trial results (pancreatic screens)
- Rodents to humans translation

# GI181771X (771) – Background

- **771** 1,5-Benzodiazepine & orally active
  - Cholecystokinin-1 receptor (CCK1R) agonist &
  - CCK-2 receptor (CCK2R) antagonist
- 771 Developed in late 90's for Anti-obesity indication
  - CCK1R's role in mediating "satiety" signal to central nervous system (i.e., centrally acting mechanism)

# Cholecystokinin (CCK)

- CCK Peptide hormone, originally described as CCK-33 (33amino acid peptide)
  - Isoforms CCK-8, CCK-22, CCK-33, CCK-39 & CCK-58
  - CCK-8  $\rightarrow$  Major active/transmitter isoform
  - CCK-58  $\rightarrow$  Major intestinal isoform in rats & humans

#### CCK – Synthesized & secreted by

- Enteroendocrine I cells (duodenal & jejunal mucosa) → <u>Intestinal CCK</u> (secreted in response to fatty acids & proteins in the intestinal lumen)
- 2. Neurons (enteric nervous system, & brain) → <u>Neuronal CCK</u>

# Cholecystokinin (CCK)

- CCK activates CCK receptors & modulates physiological functions — Pancreatic exocrine secretion, gallbladder contraction & delayed-gastric emptying etc.
- **CCK receptors** (G-protein coupled receptors) two types:
  - 1. CCK-1 receptor (CCK1R) pancreas, gallbladder, stomach, small intestine, vagus nerve, intra-pancreatic neurons & hypothalamus
  - 2. CCK-2 receptor (CCK2R) neurons, pancreas, stomach & adrenals

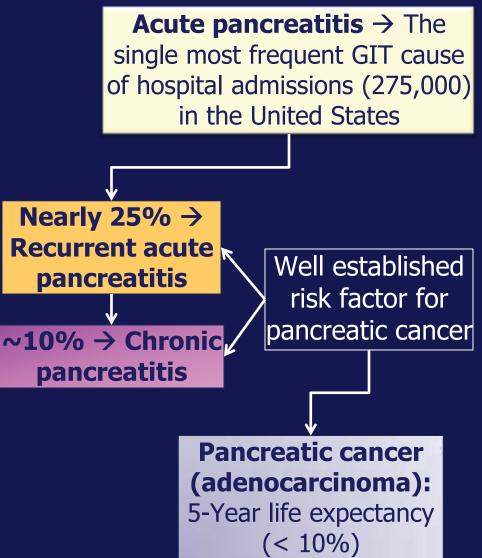
CCR1R mediates "satiety signal" via vagal afferent
nerves to central nervous system → a novel target
for obesity treatment

## **CCK & Rodent Exocrine Pancreas**

- CCK-induced pancreatitis in rodents via CCK1R hyperstimulation → well known since 1970's
  - Rapid & highly reproducible, histologically quite similar to early phase of acute pancreatitis in humans
  - Widely used animal model for experimental pancreatitis
- 771  $\rightarrow$  CCK1R agonist
  - Pancreatitis Rodent safety studies
  - Rodent-specific hurdles dose limitation, morbidity & mortality, particularly in long-term & carcinogenicity studies

# Pancreatitis – Humans?

The Epidemiology of Pancreatitis & Pancreatic Cancer. Gastroenterology 144: 1252–1261, 2013





# **Clinicians & Agencies:** Sensitive to pancreatic effects in preclinical species



#### **771** → **CCK1R agonist** ~ Pancreatitis in rodents



# 771 (CCK1R agonist) Program?

# 771 (CCK1R agonist) Program?

#### Scientific rationales:

- CCK1R-mediated "satiety signal" a novel mechanism to treat obesity
- 2) Several efficacy studies in humans (published 1981, 1988, 1994 & 2001) with CCK-8 & CCK-33 (iv infusion) → increase perception of fullness, decrease hunger & reduced energy intake
- 3) Inter-species related differences in CCK1R expression & CCK-induced pancreatic responses (relevant publications & in-house data)

## 771-Related Pancreatic Responses: Rats, Mice, Monkeys & Humans

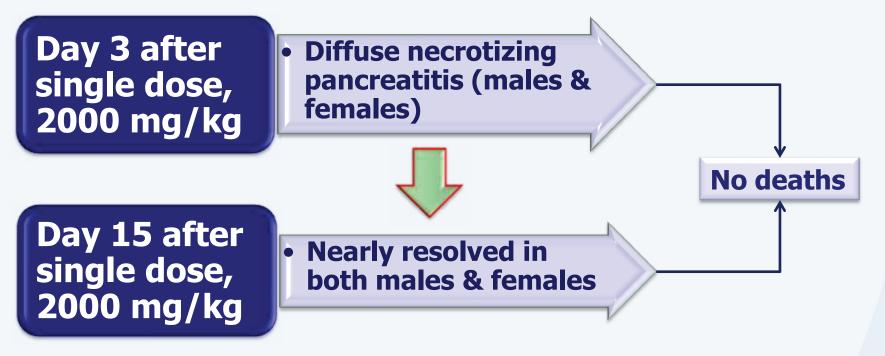
#### **Studies:**

- Acute (single) dose study in rats & mice
- Repeat dose studies
  - Rats: 7-Day, 4-Week & 26-Week
  - Monkeys: 4-Week, 26-Week & 52-Week
  - Humans: 24-Week Clinical trial in overweight & obese patients

## 771: Acute Study in Rats

#### • 12 Male & 12 Female animals: 6 Rats/Sex/Group

 <u>Single oral dose</u> at 2000 mg/kg 771 & vehicle<sup>1</sup> & sacrificed on Day 3 & Day 15

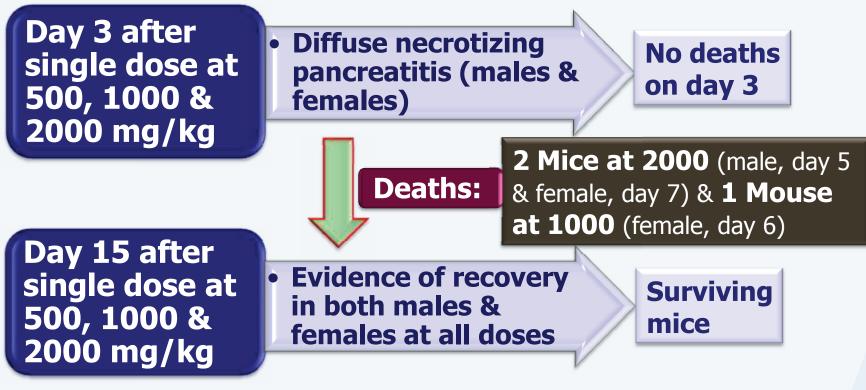


<sup>1</sup>Polyethylene glycol (PEG) 400

# 771: Acute Study in Mice

#### • 24 Male & 24 Female mice: 6 Mice/Sex/Group

– <u>Single oral dose</u> at 500, 1000 & 2000 mg/kg 771 & vehicle<sup>1</sup>) & sacrificed on <u>Day 3</u> & <u>Day 15</u>



<sup>1</sup>Polyethylene glycol (PEG) 400

## Differences in Pancreatic Responses – Mice & Rats

- At 2000 mg/kg 771 Severity/necrosis in mice > rats
- At 2000 mg/kg 771 Recovery in rats > mice
  - Systemic exposure in mice (~ 2x) > rats
    AUC: 8865 hr.ng/ml (mice) versus 4415 hr.ng/ml (rats)
  - CCK1R structure/binding differences between mice & rats\*
    - ♦ For example, CCK analog JMV-180 → partial agonist (rats) & full agonist (mice)

\*Ji et al., 2000. Species Differences between Rat and Mouse CCKa receptors Determine the Divergent Acinar Cell response to the Cholecystokinin Analog JMV-180. J Biol Chem 25:19115-19120. \*Matozaki et al., 1989. A new CCK analog differentiates two functionally distinct CCK receptors in rat and mouse pancreatic acini. Am J Physiol 257:594-600.



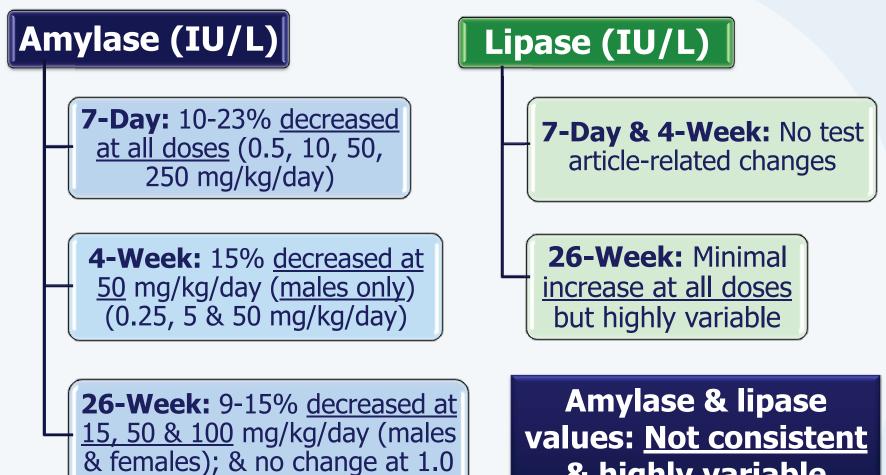
**3. Human clinical trial** 

### 771: Repeat-dose Studies in Wistar Han Rats

Study	7-Day	4-Week	26-Week
Study type	Non-GLP	GLP	GLP
Number of Rats/Dose	6 Males	$10+8^1$ Males & $10+8^1$ Females	$16+8^2$ Males & $16+8^2$ Females
Doses <sup>3</sup> (mg/kg/day)	0 (Vehicle <sup>4</sup> ), 0.5, 10, 50 & 250	0 (Vehicle <sup>4</sup> ), 0.25, 0.5 & 50 <sup>1</sup>	0 (Vehicle <sup>5</sup> ), 1, 15, 50 & 100 <sup>2</sup>
Endpoints <sup>5</sup>	Routine non-GLP Partial tissue list	Routine GLP Full tissue list	Routine GLP Full tissue list

<sup>1</sup>2-Week recovery (50 mg/kg/day); <sup>2</sup>4-Week recovery (100 mg/kg/day); <sup>3</sup>Oral dose; <sup>4</sup>Vehicle = Polyethylene glycol (PEG) 400; <sup>5</sup>Vehicle = 0.5% hydroxypropylmethylcellulose & 0.1% Tween 80 **5**Pancreatic effects

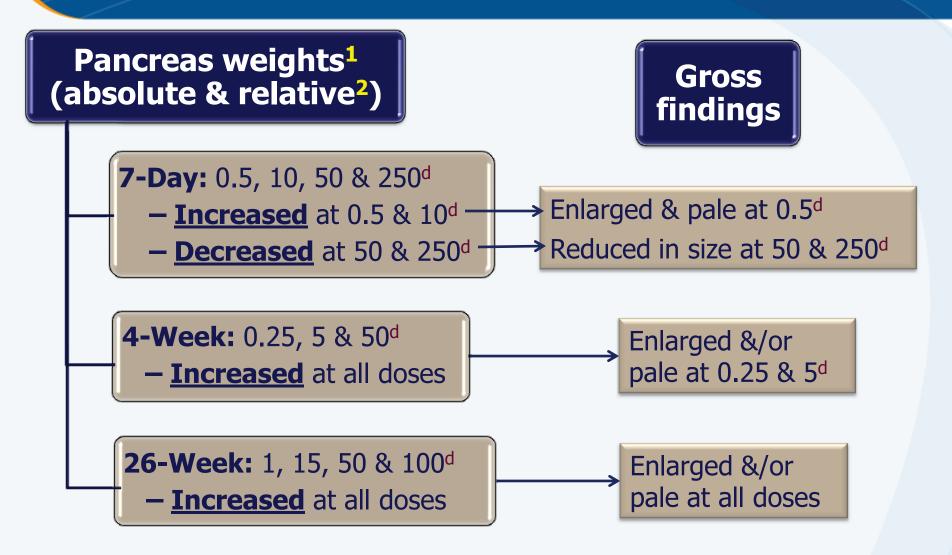
## **Results: Clinical Pathology (Amylase & Lipase)**



mg/kg/day)

<u>& highly variable</u>

## **Results:** Pancreatic Weights/Gross Findings

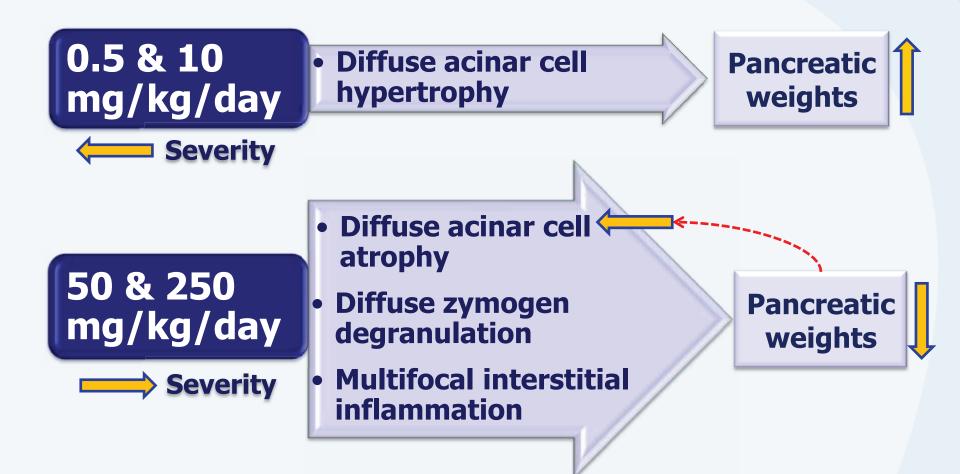


<sup>1</sup>P  $\leq$  0.05 or 0.01; <sup>2</sup>Relative to terminal body weight & <sup>d</sup>mg/kg/day

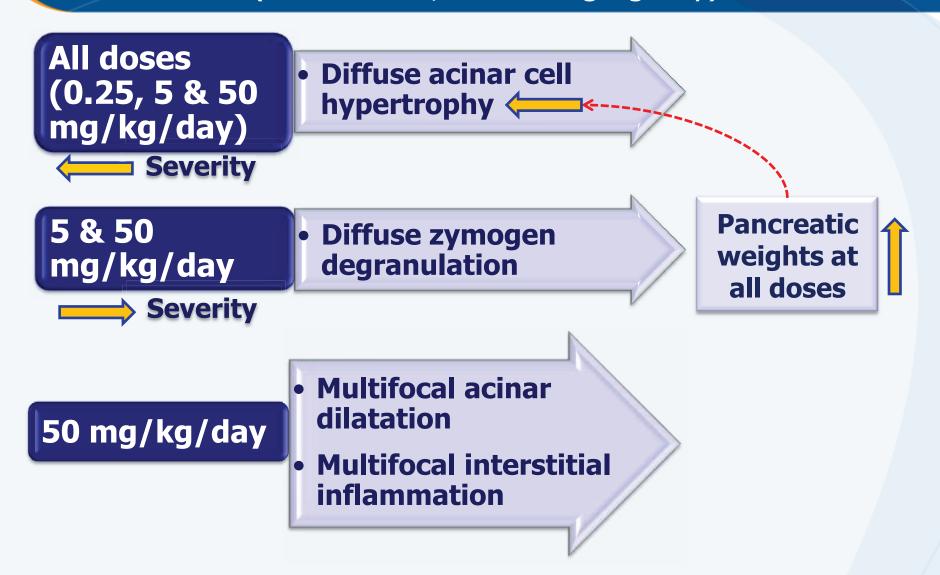
## **Results: Pancreatic Pathology in Rats**

- Major histopathological findings (7-Day, 4-Week & 26-Week):
  - Acinar cell hypertrophy enlarged cells with increased zymogen granules &/or decreased zymogen granules plus cytoplasmic basophilia
  - Zymogen degranulation decreased cytoplasmic zymogen granules with or without cytoplasmic vacuolation
  - Acinar cell atrophy decreased cell size with relatively less zymogen granules & cytoplasmic basophilia
  - Interstitial inflammation (primarily, mononuclear cells) &/or interstitial fibrosis
  - Focal acinar cell hyperplasia well demarcated area (< 3 mm in diameter), tubular-glandular pattern with occasional mitotic figures & some degree of compression of adjacent parenchyma

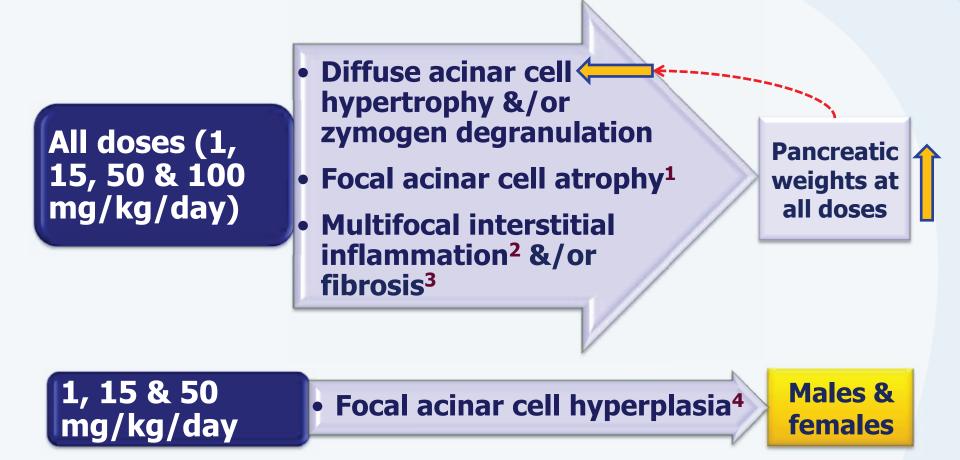
#### **7-Day Rat Study: Dose-related** Pancreatic Findings (Doses: 0.5, 10, 50 & 250 mg/kg/day)



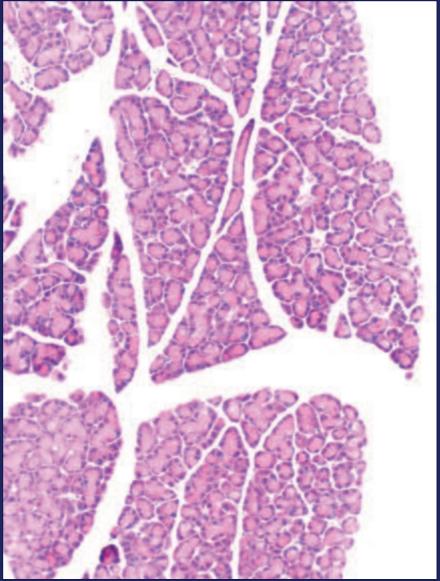
# **4-Week Rat Study: Dose-related** Pancreatic Findings (Doses: 0.25, 5 & 50 mg/kg/day)



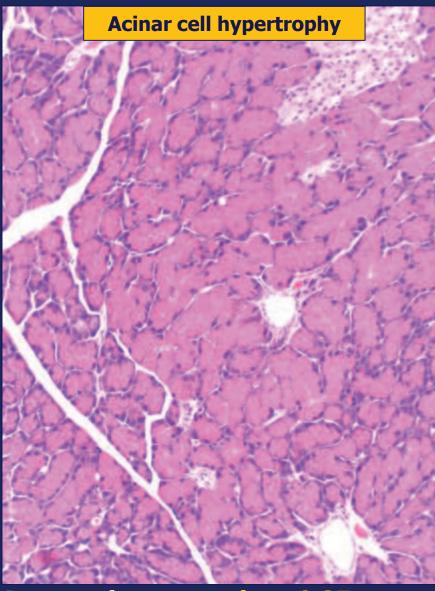
#### **26-Week Rat Study:** Pancreatic Findings (Doses: 1, 15, 50 & 100 mg/kg/day)



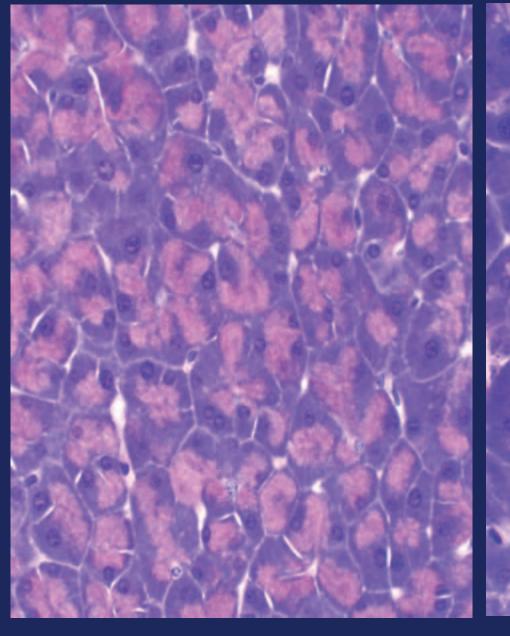
<sup>1</sup>Females all doses; males  $\geq$  15 mg/kg/day; <sup>2</sup>Males all doses; females  $\geq$  50 mg/kg/day; <sup>3</sup>Females at 100 mg/kg/day; <sup>4</sup>3/16 Males & 3/15 females at 15 mg/kg/day & 1/11 & 2/15 females at 1 & 50 mg/kg/day, respectively



Pancreas from a **control rat**, H&E 100X



Pancreas from a **rat given 0.25** mg/kg/day 771 for 4 weeks. Note diffuse <u>acinar cell hypertrophy</u>, H&E 100X



**Control pancreas. H&E 400X** 

Zymogen degranulation & cytoplasmic basophilia

Note zymogen degranulation & cytoplasmic basophilia. H&E 400X

Acinar cell hyperplasia

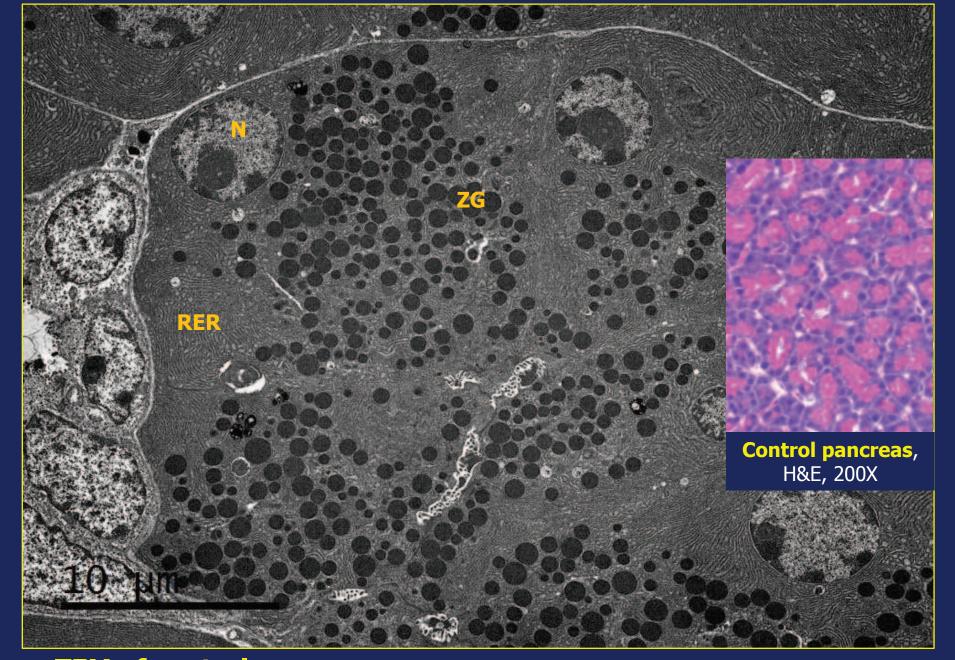
Pancreas from a male rat given 15 mg/kg/day 771 for 26 weeks. H&E 200X

#### Focal Acinar cell hyperplasia

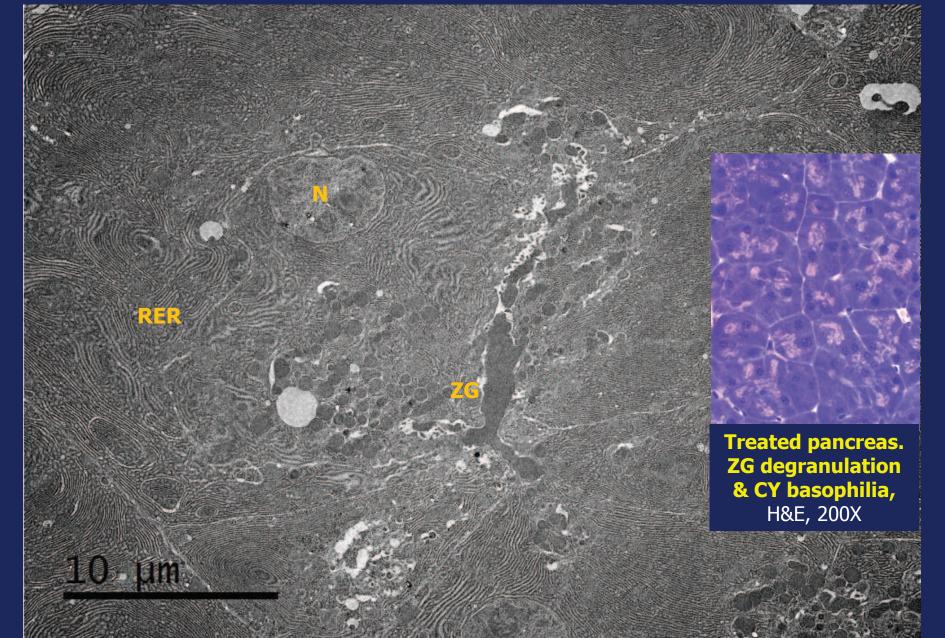
# Focal acinar cell hyperplasia (not adenoma):

- Well demarcated area, < 3 mm in diameter
- Tubular-glandular pattern with occasional mitotic figures & some degree of compression of adjacent parenchyma
- STP diagnostic criteria

High power (H&E 200X). Note tubuloglandular pattern & mitotic figures (arrows).



**TEM of control pancreas** – Note acinar cells with zymogen granules (ZG) & rough endoplasmic reticulum (RER)

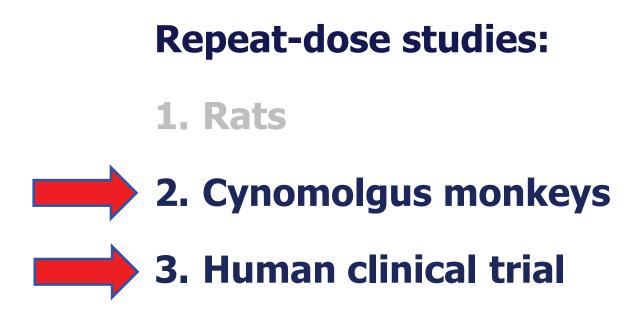


**TEM of zymogen (ZG) degranulation & cytoplasmic (CY) basophilia.** Note acinar cells with abundant RER & few zymogen granules

#### **Summary of 771-related Findings in Wistar Han rats**

Study	7-Day	4-Week	26-Week	
Doses (mg/kg/day)	0 (vehicle), 0.5, 10, 50 & 250	0 (vehicle), 0.25, 5 & 50	0 (vehicle), 1, 15, 50 & 100	
Amylase & Lipase	Amylase (decreased) & Lipase (increased) changes → Not consistent among studies & highly variable			
Pancreatic	<u>Increased</u> (0.5, 10)	<u>Increased</u> – all doses	<u>Increased</u> – all doses	
weights	<u>Decreased</u> (50, 250)	(0.25, 5 & 50)	(1, 15, 50 & 100)	
Pancreatic	0.5 & 10: DACH	0.25, 5 & 50: DACH	<b>1, 15, 50 &amp; 100:</b> DACH,	
changes –	50 & 250: DACA,	5 & 50: Z-D	Z-D, FACA, I-INF & IF	
microscopic	Z-D & I-INF	50: A-D & I-INF	<b>1, 15 &amp; 50:</b> ACHP	
<sup>1</sup> Recovery –	No Recovery group	2-Week: reversible	4-Week: reversible	
microscopic		(except I-INF)	(except IF)	

**DACH** = Diffuse acinar cell hypertrophy; **DACA** = Diffuse Acinar cell atrophy; **DACA** = Diffuse acinar cell atrophy; **FACA** = Focal acinar cell atrophy; **A-D** = Acinar dilatation; **Z-D** = Zymogen degranulation; **I-INF** = Interstitial inflammation; **IF** = Interstitial fibrosis; **ACHP** = Acinar cell hyperplasia



### **Repeat Dose Studies in Cynomolgus Monkeys**

Study	4-Week	26-Week	52-Week
Number of animals/Dose	3 Males+2 <sup>1</sup> & 3+2 <sup>1</sup> Females	4+2 <sup>1</sup> Males & 4+2 <sup>1</sup> Females	4+2 <sup>1</sup> Males & 4+2 <sup>1</sup> Females
Doses (mg/kg/day)	0 (Vehicle <sup>2</sup> ), 1, 50 & 250/125	0 (Vehicle <sup>3</sup> ), 10, 75 & 150 <sup>4</sup>	0 (Vehicle <sup>3</sup> ), 50, 125 & 300/500 <sup>5</sup>
Amylase & lipase	No change	No change	No change
Pancreatic weights	No change	No change	No change
Microscopic findings (pancreas)	None	None	None

<sup>1</sup>Recovery; <sup>2</sup>Vehicle = Polyethylene glycol (PEG) 400; <sup>3</sup>Vehicle = 0.5% hydroxypropylmethylcellulose & 0.1% Tween 80; <sup>4</sup>Doses represent 25x, 188x & 375x <u>anticipated maximum</u> <u>clinical dose</u> of 24 mg/day (0.4 mg/kg/day, based on a 60 kg individual); Based on body surface area (mg/m<sup>2</sup>) 8x, 61x & 122x anticipated maximum clinical dose, 14.8 mg/m<sup>2</sup>; <sup>5</sup>Doses represent 167x, 417x & 1000x <u>anticipated maximum clinical dose</u> of 15 mg/day (0.3 mg/kg/day, based on a 50 kg individual); Based on body surface area (mg/m<sup>2</sup>) 58x, 147x & 353x anticipated maximum clinical dose, 10.2 mg/m<sup>2</sup>

### 771: Clinical Trial in Overweight & Obese Patients\*

- 24-Week randomized double-blinded study
  - 701 (467 Women & 234 men), overweight (BMI >27 kg/m<sup>2</sup> & <30 kg/m<sup>2</sup>) or obese (BMI >30 kg/m<sup>2</sup>) patients
  - **Doses:** 0.25, 0.5, 1.0 & 1.5 mg (soft gelatin capsules), t.i.d.
- Primary efficacy endpoint: Absolute body weight change from baseline at week 24
  - Monitor pancreatic & gallbladder effects: abdominal ultrasound & MRI before & after treatment
  - Clinical pathology extended parameters to monitor hepatobiliary & pancreatic abnormalities

# **771: Clinical Trial Results**

#### Results:

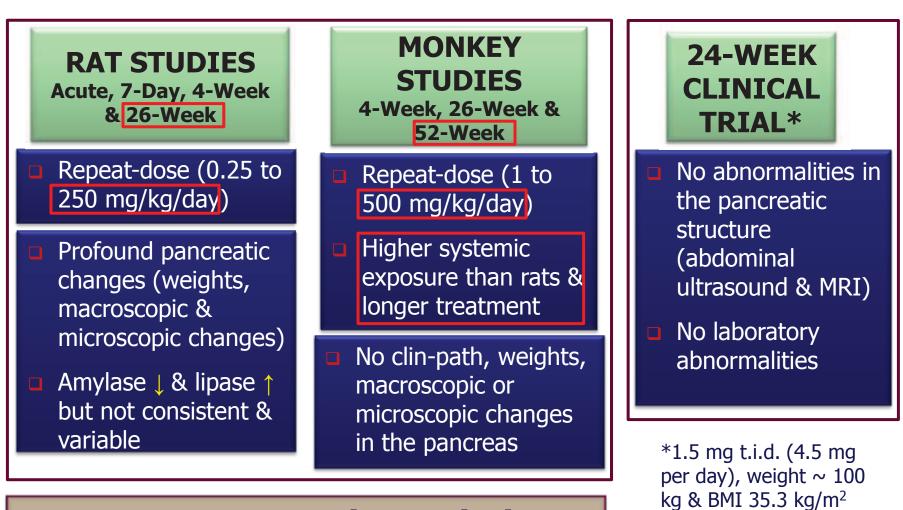
- No 771 treatment-associated abnormalities in pancreatic or hepatobiliary structure (ultrasound & MRI)
- No laboratory abnormalities of pancreatic/hepatobiliary disease

771 → Did not reduce body weight & development stopped\*

## 771 Data: Rodents – Monkeys – Humans

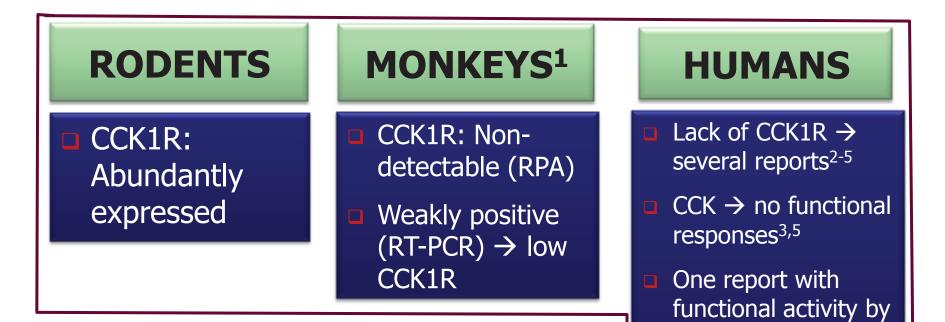
\*Jordan et al. Clin Pharmacol Therap 83:281287, 2008.

## 771 (CCK1R agonist) in rats, monkeys & humans



**771**  $\rightarrow$  **Inter-species variation** 

# **CCK1R expression profiles – Pancreatic Acinar cells**

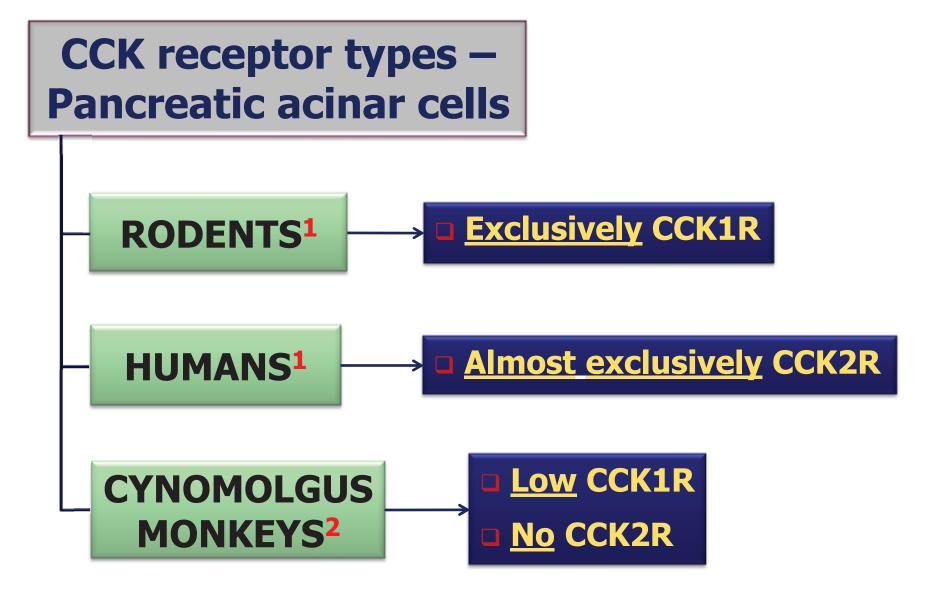


CCK on isolated

human acinar cells<sup>6</sup>

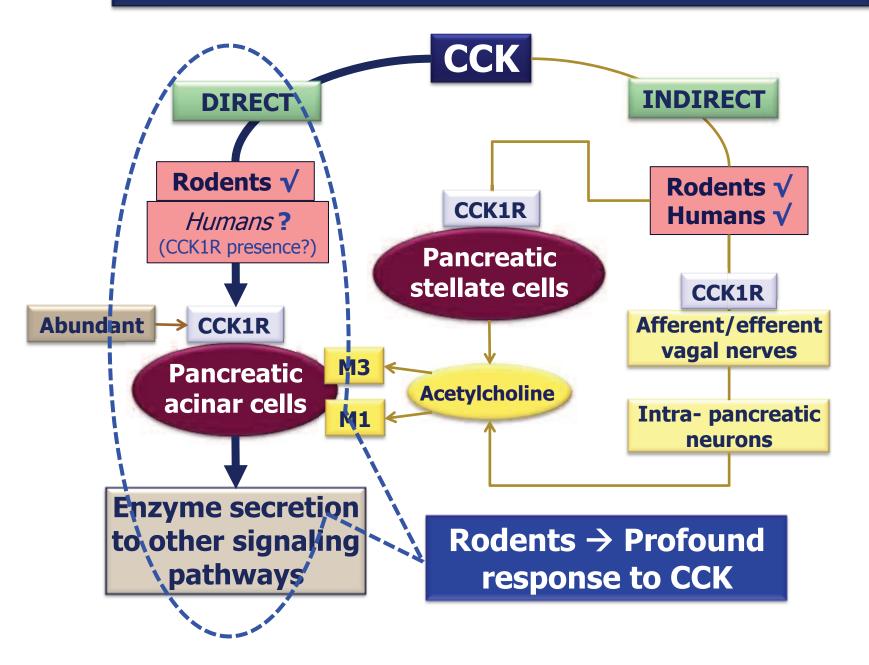
#### Inter-species variation $\rightarrow$ CCK1R

<sup>1</sup>Holicky et al., 2001; RPA = Ribonuclease protection assay; RT-PCR = Reverse transcriptase polymerase chain reaction <sup>3</sup>Ji et al., 2001, <sup>5</sup>Miyasaka et al., 2002, Wonk et al., 1994; <sup>4</sup>Morisset et al., 2004; <sup>6</sup>Murphy et al. 2008



<sup>1</sup>Berna MJ and Jensen RT. Curr Top Med Chem 1211-1231, 2007 <sup>2</sup>Holicky et al. Am J Physiol Gastrintes Liver Physiol, G507-G514, 2001

#### **CCK-mediated pancreatic acinar cell responses**



#### **Conclusion & Translation of Rodent Pancreatic Findings to Cynomolgus Monkeys & Humans**

 Pancreatic responses to 771 (CCK1R agonist): Different among rodents (sensitive & responsive), monkeys (non-responsive) & humans (no response – 24-Week clinical trial)

#### Relevant inter-species variations:

- CCK1R expression (abundant in rodents; low in monkeys; & undetectable/absent in humans, except one report showing functional response in isolated human acinar cells)
- CCK receptor types → Rodents (CCK1R); humans (CCK2R) & cynomolgus monkeys (low CCK1R & no CCK2R)
- CCK1R-mediated acinar cell response (direct & indirect pathways in rodents versus mostly indirect in humans)



CCK1R agonist-induced pancreatic findings in rodents – unlikely to occur in monkeys & humans

# Acknowledgements

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