

Brepocitinib, a Selective TYK2/JAK1 Inhibitor Under Evaluation for the Treatment of Dermatomyositis, Reduces Inflammatory Cytokine Signaling and Interferon-induced Apoptosis in Primary Human Epidermal Keratinocytes

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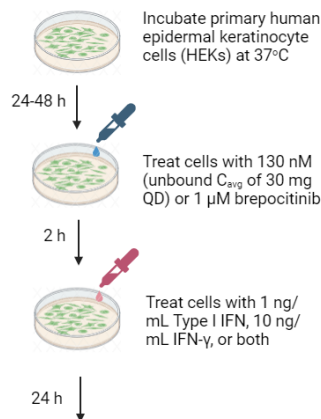
Background

- Dermatomyositis (DM) is characterized by inflammatory and degenerative changes of skin and muscle.¹
- Type I IFN and other pro-inflammatory cytokines relevant to DM signal through the JAK-STAT pathway.²
- Cutaneous disease activity poses a significant unmet need for many patients, which is characterized by exaggerated keratinocyte apoptosis³ and correlated with serum levels of IFN- β , IL-6, and IL-10⁴
- Brepocitinib (15 mg and 30 mg QD) is being evaluated in a double-blind, randomized, placebo-controlled Phase 3 study in patients with active DM (NCT05437263; VALOR Study).

Objective

To evaluate the efficacy of brepocitinib in preventing Type I IFN-induced apoptosis and pro-inflammatory cytokine signaling in primary human epidermal keratinocytes.

Methods

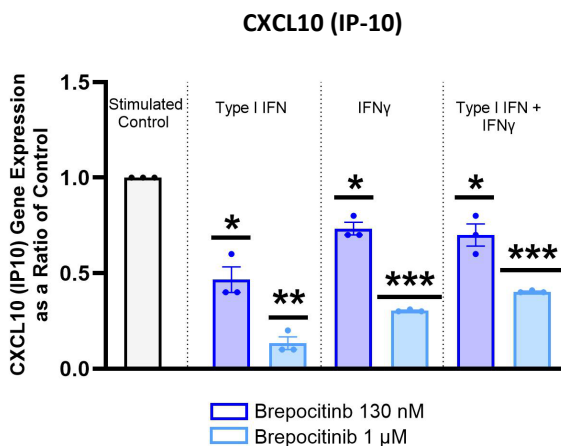
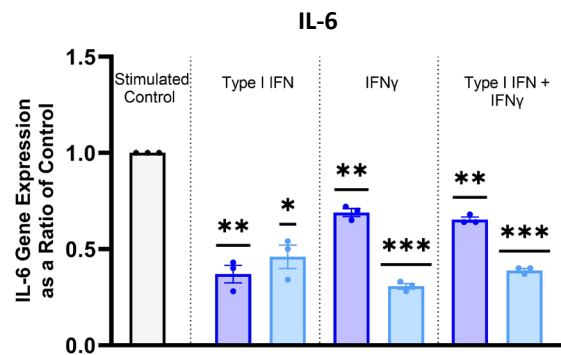


- Gene expression (IL-6, IL-12, ICAM-1, IP-10, MCP-1): qPCR
- STAT phosphorylation: western blotting
- Apoptosis: flow cytometry via Annexin V staining

Full abstract available at the Pivovant Therapeutics booth in the exhibit hall.

Results

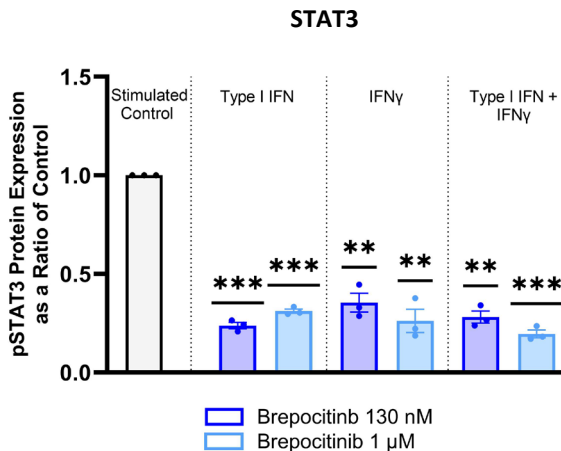
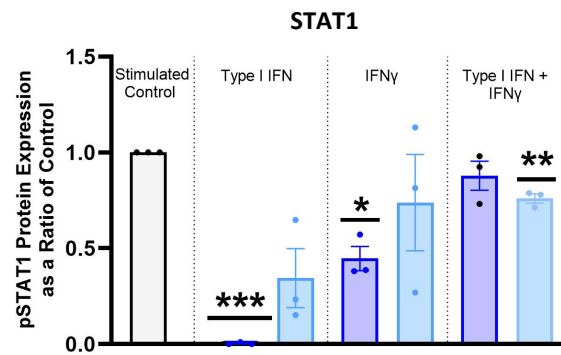
Brepocitinib Reduces IFN-induced Inflammatory Gene Expression



N=3 replicates per condition. Control bar represents the matched stimulation alone. * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$ using a one-sample T-test, relative to the matched stimulated control condition.

- CCL2 (MCP1) demonstrated similar dose dependent and significant reductions
- ICAM-1 and IL-12 demonstrated similar dose dependent but not consistently significant reductions

Brepocitinib Decreases STAT1 and STAT3 Phosphorylation

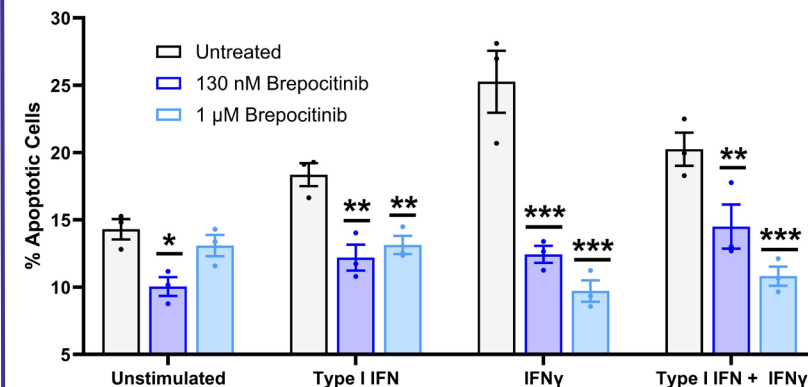


N=3 replicates per condition. Control bar represents the matched stimulation alone. * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$ using a one-sample T-test, relative to the matched stimulated control condition.

References

- Dalakas MC et al., *N. Engl. J. Med.* 1991 Nov 21;325(21):1487-98
- Greenberg S et al., *Genes Immun.* 2012 Apr;13(3):207-13.
- Pablos JL et al., *J Pathol.* 1999 May;188(1):63-8.
- Chen M et al., *Br J Dermatol.* 2018 Dec;179(6):1334-1341.

Brepocitinib Reduces IFN-induced Apoptosis



N=3 replicates per condition. * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$ using a two-way ANOVA with Dunnett's multiple comparisons test. Comparisons made to untreated control for each condition.

Conclusions

- Brepocitinib's unique mechanism of action, inhibiting both TYK2 and JAK1, may be uniquely suited to improving skin manifestations in DM, as IL-6 signals via JAK1 and IFN- β and IL-10 signal via TYK2/JAK1.
- Brepocitinib demonstrated significant inhibition of Type I IFN signaling, a central driver in the pathogenesis of DM, and IFN γ signaling, a more recently appreciated driver in dysregulated cytokine signaling in DM.
- Brepocitinib significantly reduced STAT1 and STAT3 phosphorylation, led to concentration-dependent reductions in pro-inflammatory gene expression levels, including IL-6, and normalized apoptosis to basal levels in IFN-stimulated HEKs.
- These data provide further support for the potential of once-daily oral brepocitinib to be effective for the treatment of active DM, a hypothesis currently being tested in the ongoing Phase 3 VALOR study.

Disclosures

Jiří Vencovský Speakers bureau: Abbvie, Biogen, Boehringer, Eli Lilly, Gilead, MSD, Novartis, Pfizer, Roche, Sanofi, UCB, Werfen, Consultant of: Abbvie, Argenx, Boehringer, Eli Lilly, Gilead, Octapharma, Pfizer, UCB, Grant/research support from: Abbvie. Alexandra Goriounova, Lisa McConnachie, Brendan Johnson Employees of: Pivovant Therapeutics