TO54259 EORTC Chemo 11-12b_Layout 1 11/12/10 5:36 PM Page 1



Tivozanib Activity in Combination With Capecitabine, 5-fluorouracil (5-FU) or Docetaxel, in Traditional or Engineered Subcutaneous Breast Tumor Models

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Abstract

Background: Taxanes and fluoropyrimidines are 2 major classes of chemotherapy drugs used to treat advanced breast cancer. Recent clinical data indicate that vascular endothelial growth factor (VEGF) signaling pathway inhibitors exhibit promising activity in combination with the 5-fluorouracil (5-FU) prodrug capecitabine. The antitumor activity of tivozanib, a potent and selective kinase inhibitor of VEGF receptors-1, -2, and -3, was evaluated alone and in combination with capecitabine in a human epidermal growth factor receptor 2 (Her2)-engineered murine tumor that exhibits tivozanib resistance. In addition, tivozanib was evaluated alone and in combination with representative taxane and fluoropyrimidine chemotherapy drugs in a xenograft model of breast cancer.

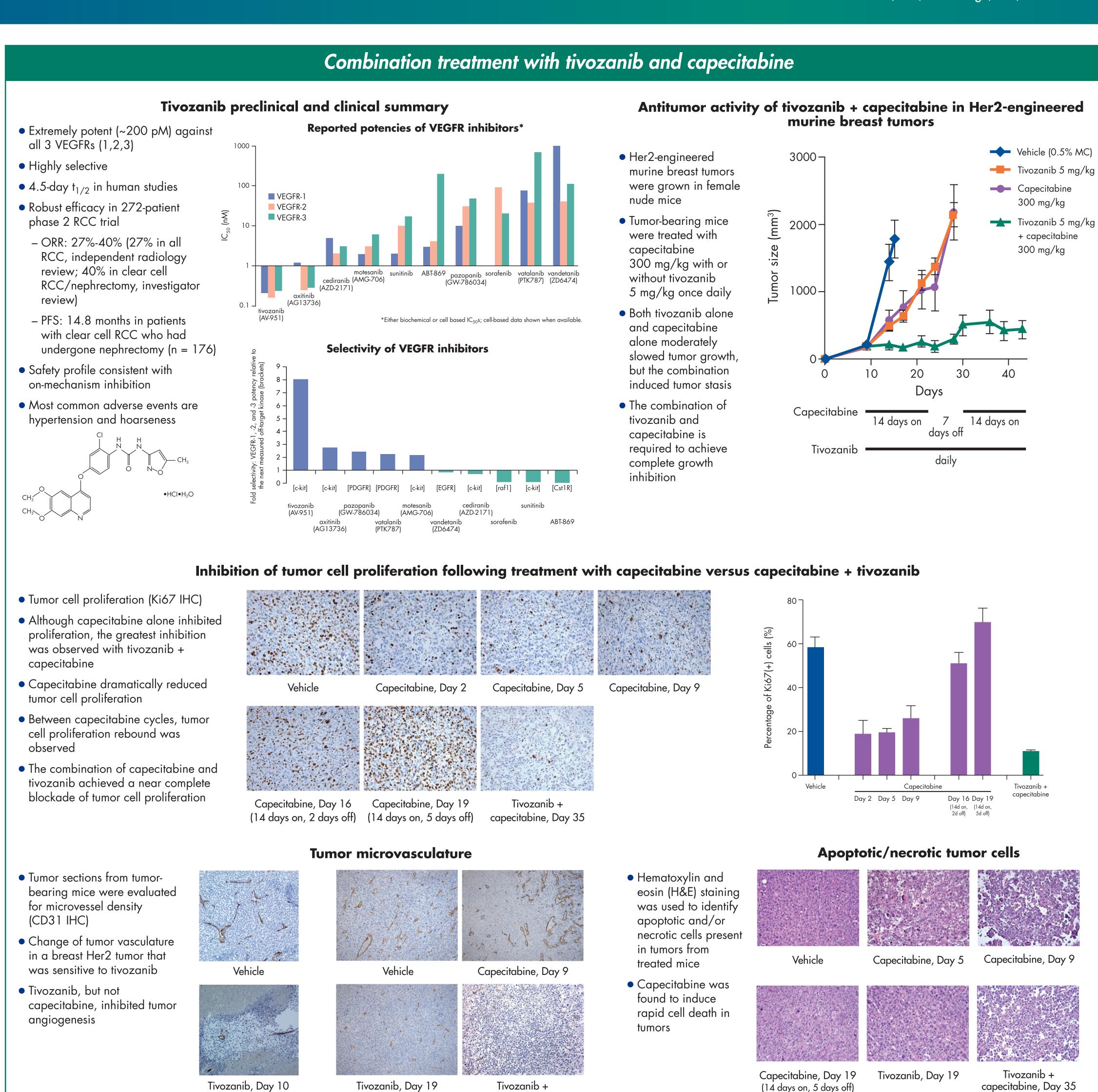
Materials and methods: Subcutaneous BH216 Her2-engineered murine or MX-1 human breast tumors were grown in female nude mice. Mice bearing Her2-engineered tumors were treated with oral tivozanib (5 mg/kg/day), capecitabine (300 mg/kg/day using a 14 days on, 7 days off schedule), or both drugs in combination. Mice bearing MX-1 tumors were treated with oral tivozanib (20 mg/kg/day), 5-FU (100 mg/kg weekly for 3 weeks) or docetaxel (10 mg/kg weekly for 3 weeks), or a combination of tivozanib and chemotherapy. Tumor growth inhibition (TGI) was calculated using standard criteria.

Results: In the Her2-engineered breast tumor model, treatment with tivozanib alone or capecitabine alone resulted in continued tumor growth with only modest TGI. However, the combination of tivozanib plus capecitabine led to complete growth inhibition. In the MX-1 xenograft model, tivozanib monotherapy exhibited robust TGI, and modest improvements in TGI were observed when tivozanib was combined with 5-FU or docetaxel relative to tivozanib monotherapy. Following discontinuation of tivozanib alone or in combination with 5-FU, tumor regrowth was observed, whereas mice treated with tivozanib plus docetaxel were tumor-free by Day 34, with no tumor recurrence at Day 63.

Conclusions: When examined in a tivozanib-resistant murine breast tumor model, tivozanib combined with capecitabine appeared to reverse tivozanib resistance. Tivozanib treatment also potently inhibited MX-1 breast tumor growth and enhanced the anti-cancer effects of 5-FU and docetaxel.

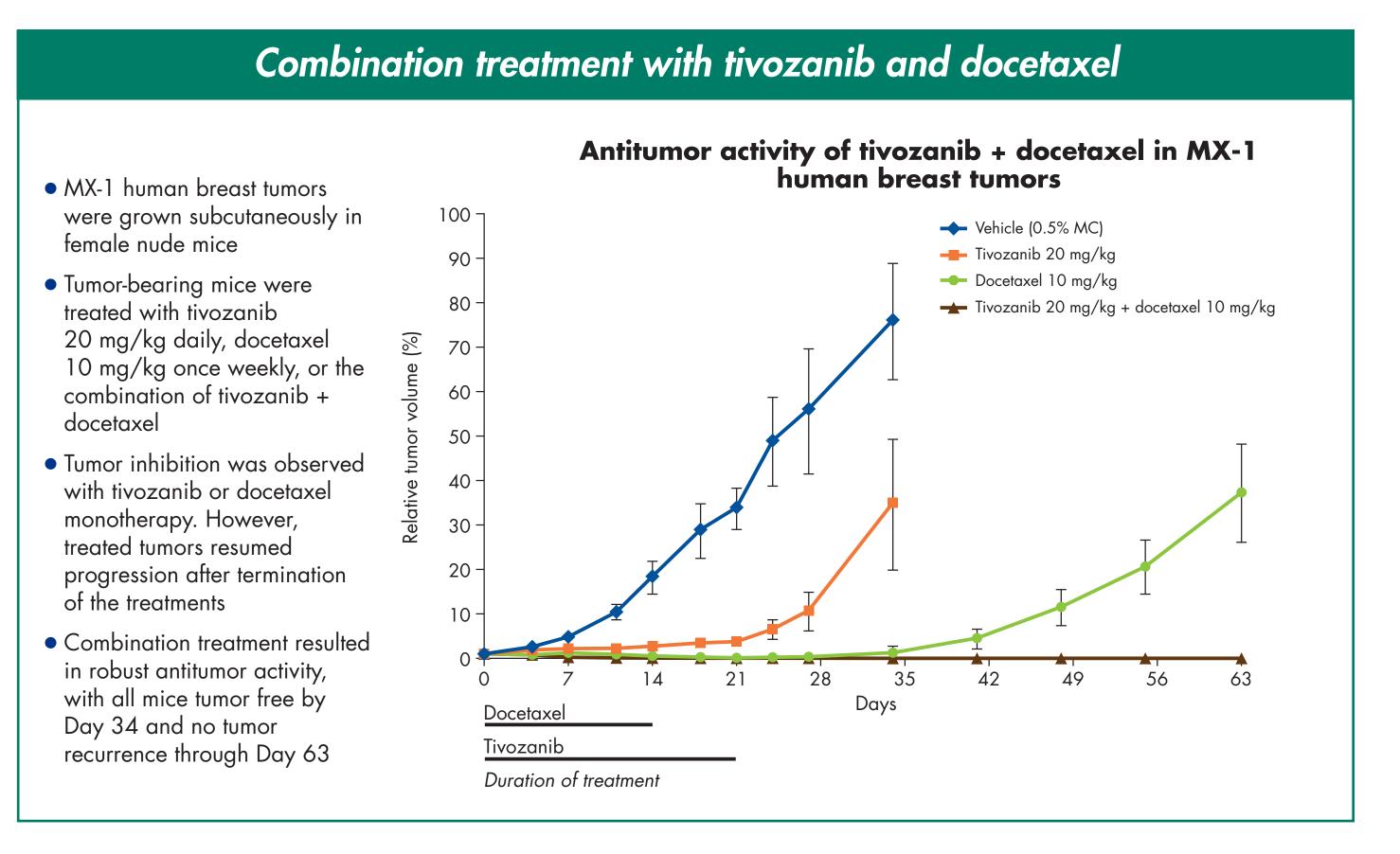
Acknowledgements

This study was supported by AVEO Pharmaceuticals, Inc., Cambridge, MA. Editorial assistance was provided by Kimberly Brooks, PhD, of MedErgy.



capecitabine, Day 35

Combination treatment with tivozanib and 5-FU Antitumor activity of tivozanib + 5-FU in MX-1 human breast tumors → Vehicle (0.5% MC) MX-1 human breast tumors Tivozanib 20 mg/kg were grown subcutaneously **→** 5-FU 100 mg/kg in female nude mice Tivozanib 20 mg/kg + 5-FU 100 mg/kg Tumor-bearing mice were treated with tivozanib 20 mg/kg daily, 5-FU 10 mg/kg once weekly, or the combination of tivozanib + 5-FU Monotherapy with tivozanib or 5-FU resulted in modest tumor growth Further improvement in tumor growth inhibition was observed with the combination of tivozanib + 5-FU compared with either given as monotherapy Duration of treatment



Summary

- Tumor models that exhibit resistance to tivozanib and chemotherapies were selected for this study
- In an engineered murine breast tumor model, combination of tivozanib and capecitabine resulted in complete tumor inhibition by compensatory mechanisms (ie, inhibition of angiogenesis and cell proliferation, respectively)
- Tivozanib greatly enhanced antitumor effects of 5-FU and docetaxel in the human breast tumor model MX-1

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ATO54259 EORTC Chemo 11-12b_Layout 1 11/12/10 5:36 PM Page 2

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POSTER PRESENTED AT THE EORTC-NCI-AACR INTERNATIONAL SYMPOSIUM ON MOLECULAR TARGETS AND CANCER THERAPEUTICS, 16-19 NOVEMBER 2010, BERLIN, GERMANY.