



Results of Pivotal Phase 2 Trial of Tagraxofusp (SL-401) in Patients with Blastic Plasmacytoid Dendritic Cell Neoplasm (BPDCN)

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Introduction and Highlights

Tagraxofusp

- Tagraxofusp is a novel targeted therapy directed to CD123
- FDA-approved for treatment of adult and pediatric patients, 2 years and older, with blastic plasmacytoid dendritic cell neoplasm (BPDCN)
 - Received Breakthrough Therapy Designation (BTD) designation
- Marketing Authorization Application (MAA) for BPDCN granted accelerated assessment, and under review, by the EMA

CD123

- CD123 is expressed on multiple malignancies including blastic plasmacytoid dendritic cell neoplasm (BPDCN), acute myeloid leukemia (AML), certain myeloproliferative neoplasms (MPN), multiple myeloma, and a variety of other myeloid and lymphoid cancers

BPDCN

- Highly aggressive hematologic malignancy, often with cutaneous and other extramedullary (e.g. lymph node, viscera) manifestations
- Poor prognosis, with a median overall survival (OS) 8-14 months from diagnosis

Tagraxofusp Phase 2 Pivotal Trial in BPDCN

- Tagraxofusp demonstrated high levels of clinical activity, with a consistent and predictable safety profile, in patients with BPDCN
- Pivotal trial results of tagraxofusp in BPDCN served as the basis for U.S. approval

BPDCN

Highly aggressive hematologic malignancy

- plasmacytoid dendritic cell (pDC) origin

Diagnostic signature:

CD123 / CD4 / CD56 – “Think 123456”

Middle aged-elderly; male predominance

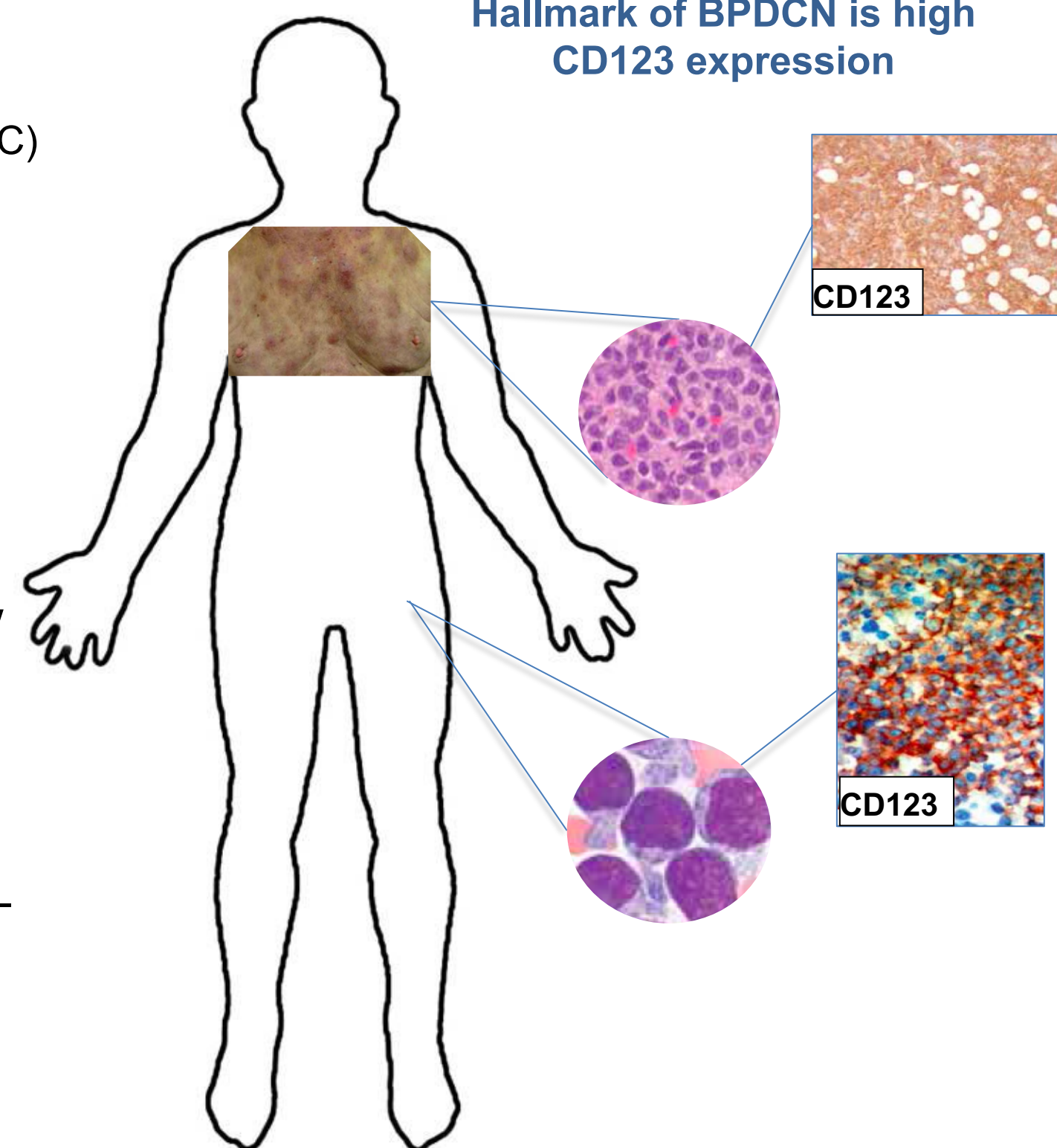
- Previously considered a lymphoma then a leukemia, now classified as unique entity

Bone marrow and skin involvement, lymph nodes and viscera as well

Poor prognosis - Median OS of 8-14 months from diagnosis

Prior to tagraxofusp approval, BPDCN was an unmet medical need

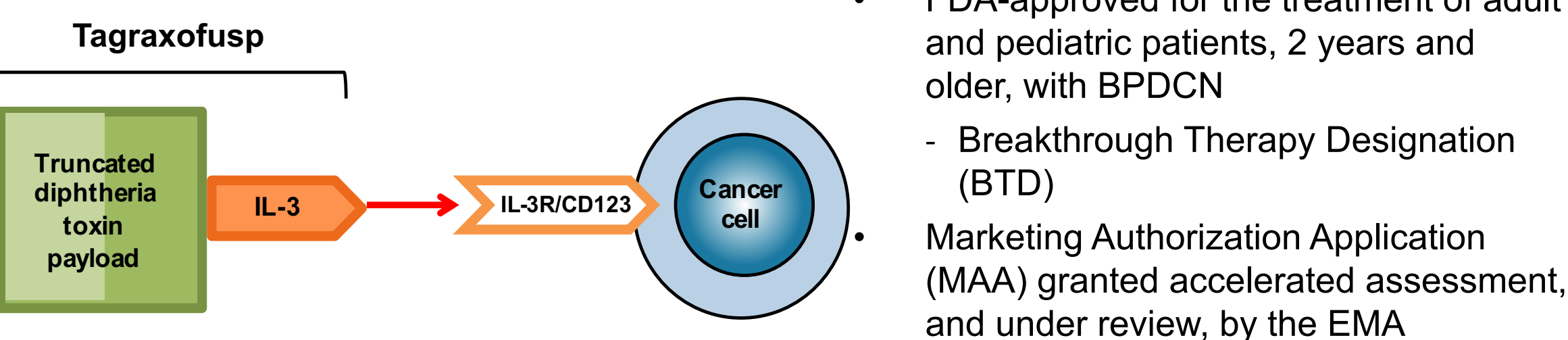
Hallmark of BPDCN is high CD123 expression



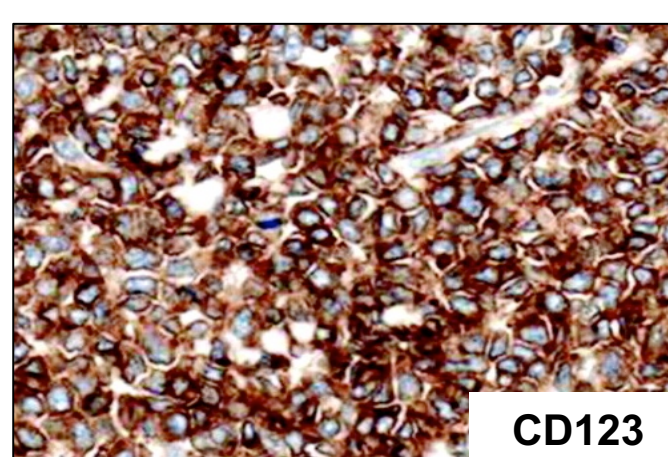
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Tagraxofusp, Mechanism of Action, and Rationale in BPDCN

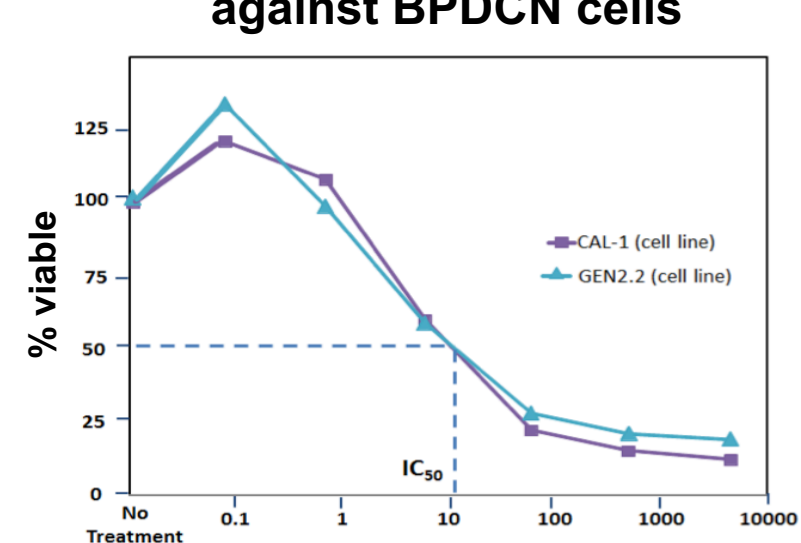
Tagraxofusp is a targeted therapy directed to CD123



BPDCN skin biopsy (IHC)



Tagraxofusp fM IC₅₀ against BPDCN cells



- CD123 overexpressed on BPDCN and other hematologic cancers
- Tagraxofusp demonstrated potent preclinical activity against BPDCN *in vitro* (IC₅₀ in femtomolar range) and *in vivo*

Tagraxofusp: Study Design and Inclusion / Exclusion

Stage 1 (Lead-in, Dose Escalation)	Stage 2 (Expansion)	Stage 3 (Pivotal, Confirmatory)
<ul style="list-style-type: none">BPDCN (1L and R/R)Tagraxofusp (7 and 12 mcg/kg) via IV infusion, days 1-5 of a 21-day cycleReceived Breakthrough Therapy Designation (BTD) designationMarketing Authorization Application (MAA) for BPDCN granted accelerated assessment, and under review, by the EMA	<ul style="list-style-type: none">BPDCN (1L and R/R)Tagraxofusp (12 mcg/kg) via IV infusion, days 1-5 of a 21-day cycleKey objectives: To further define safety and efficacy	<ul style="list-style-type: none">BPDCN (1L)Tagraxofusp (12 mcg/kg) via IV infusion, days 1-5 of a 21-day cycleKey objective: To confirm efficacy for registration
Select inclusion criteria <ul style="list-style-type: none">Patient Population:<ul style="list-style-type: none">Stage 1: BPDCN (1L or R/R)Stage 2: BPDCN (1L or R/R)Stage 3: BPDCN (1L)Age ≥18; ECOG PS 0-2Adequate organ function including: LVEF ≥ lower limit of normal, creatinine ≤1.5 mg/dL, albumin ≥2.3 g/dL, bilirubin ≤1.5 mg/dL, AST/ALT ≤2.5×ULN	Select exclusion criteria <ul style="list-style-type: none">Persistent clinically significant toxicities from prior chemotherapyReceived chemotherapy or other investigational therapy within the prior 14 daysClinically significant cardiopulmonary diseaseReceiving immunosuppressive therapy	

Tagraxofusp: Demographics

Parameter	Treatment-Naïve BPDCN n=29	Previously-Treated BPDCN n=15
Gender, N (%)		
Male	23 (79)	13 (87)
Female	6 (21)	2 (13)
Race, N (%)		
Asian	0	2 (13)
White	28 (97)	13 (87)
Other	1 (3)	0
Age (years)		
Median	67.0	72
Minimum, Maximum	22, 84	44, 80
ECOG, N (%)		
0	15 (52)	5 (33)
1	14 (48)	10 (67)
BPDCN at baseline, N (%)		
Skin	28 (97)	13 (87)
Bone Marrow	14 (48)	9 (60)
Peripheral Blood	7 (24)	1 (7)
Lymph Nodes	13 (45)	8 (53)
Viscera	4 (14)	0

Safety Profile in Patients in Pivotal Trial (STML-401-0114)

Safety: Tagraxofusp (12 mcg/kg/day)

Safety of tagraxofusp assessed in 94 adults with treatment-naïve or previously-treated malignancies treated with tagraxofusp at the labeled dose and schedule.

- Most common adverse reactions (incidence ≥30%): capillary leak syndrome (CLS), nausea, fatigue, peripheral edema, pyrexia, and weight increase
- Most common laboratory abnormalities (incidence ≥50%): decreases in albumin, platelets, hemoglobin, calcium, sodium, and increases in glucose, alanine aminotransferase (ALT) and aspartate aminotransferase (AST)
- CLS¹ in clinical trials was 55% in patients receiving tagraxofusp, including Grades 1 or 2 in 46% (43/94), Grade 3 in 6% (6/94), Grade 4 in 1% (1/94), and 2 fatal events (2/94, 2%)

In an additional 76 patients treated at 12 µg/kg/day in all schedules, there were 3 Grade 3 (4%), 1 Grade 4 (1%)² and 1 Grade 5 (1%) investigator-assessed CLS events

Adverse Reactions in ≥ 10% of Patients Receiving 12 mcg/kg					
	N=94			N=94	
	All Grades (%)	Grade ≥ 3 (%)		All Grades (%)	Grade ≥ 3 (%)
Capillary leak syndrome	55	9	Febrile neutropenia	20	18
Nausea	49	0	Dyspnea	19	2
Fatigue	45	7	Insomnia	17	0
Peripheral edema	43	1	Tachycardia	17	0
Pyrexia	43	0	Anxiety	15	0
Weight increase	31	0	Hypertension	15	6
Chills	29	1	Cough	14	0
Headache	29	0	Epistaxis	14	1
Hypotension	29	9	Oropharyngeal pain	12	0
Decreased appetite	24	0	Confusional state	11	0
Constipation	23	0	Hematuria	10	0
Vomiting	21	0	Pain in extremity	10	2
Back pain	20	2	Petechiae	10	0
Diarrhea	20	0	Pruritus	10	0
Dizziness	20	0			

¹Defined as any event reported as CLS during treatment with tagraxofusp or the occurrence of at least 2 of the following CLS manifestations within 7 days of each other: hypoalbuminemia, edema, hypotension.

²A myocardial infarction, Grade 5, was reported in this patient.

Tagraxofusp: Clinical Activity

Response Rates in BPDCN Patients (12 mcg/kg) (n=44)

Efficacy Measures	Treatment-Naïve Patients (N=29)	Previously-Treated Patients (N=15)
ORR, % (n)	90% (26)	67% (10)
CR/CRc rate, % (n)	72% (21)	13% (2)
Median duration of CR/CRc, months (min, max)	Not yet reached (1, 42)	Not yet reached (3.7, 13.9)
Bridged to SCT, % (n)	45% (13)	7% (1)

- Stage 3 was designed to serve as the pivotal, confirmatory cohort for the STML-401-0114 study in BPDCN
- Stage 3 met its primary endpoint with a 54% rate (7/13) of CR + CRc [95% CI: 25.1, 80.8]

CR=complete response; CRc=clinical complete response; ORR=overall response rate; SCT=stem cell transplant

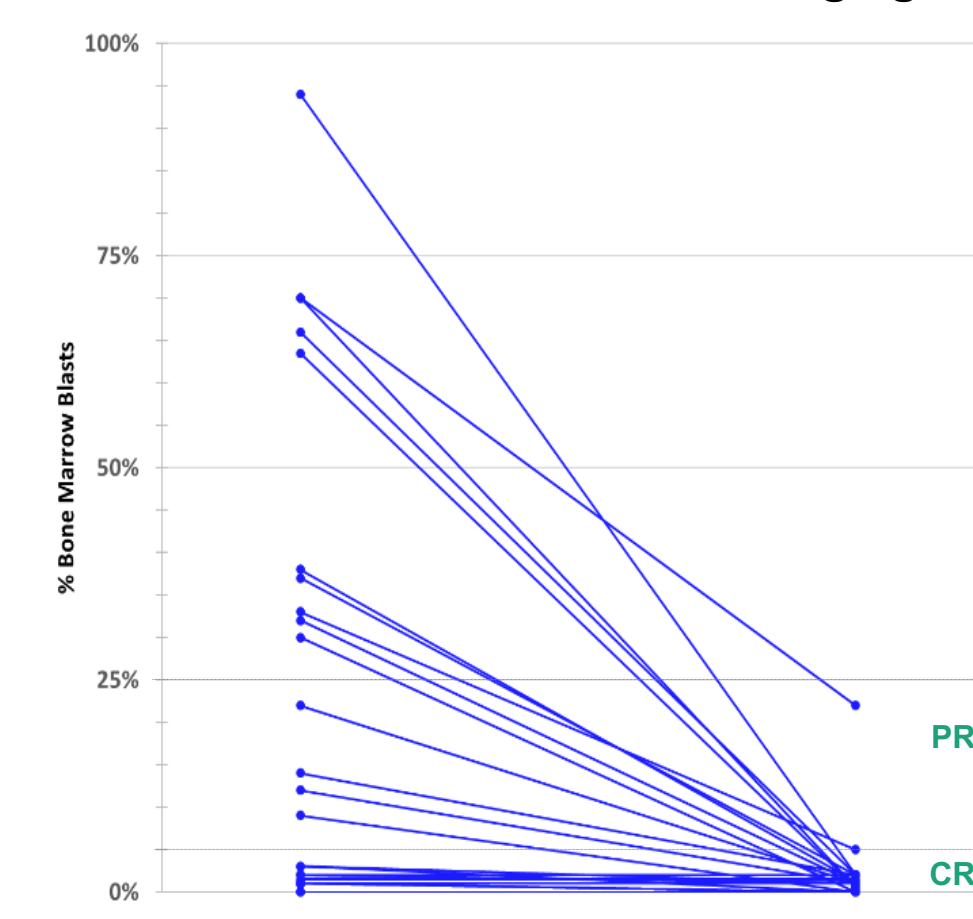
Tagraxofusp: Clinical Responses

- 71 year old female with BPDCN**
- Treatment-naïve patient with extensive skin and bone marrow (BM) involvement
- Received six cycles of tagraxofusp at 12 mcg/kg
- Panel A (baseline): Extensive skin and BM involvement
 - BM blasts – 14%
 - mSWAT – 11.3%
- Panel B (day 21): Skin and BM responses
 - BM blasts – 3%
 - mSWAT – 0%
- Bridged to stem-cell transplantation after achieving CR and 6 cycles of tagraxofusp

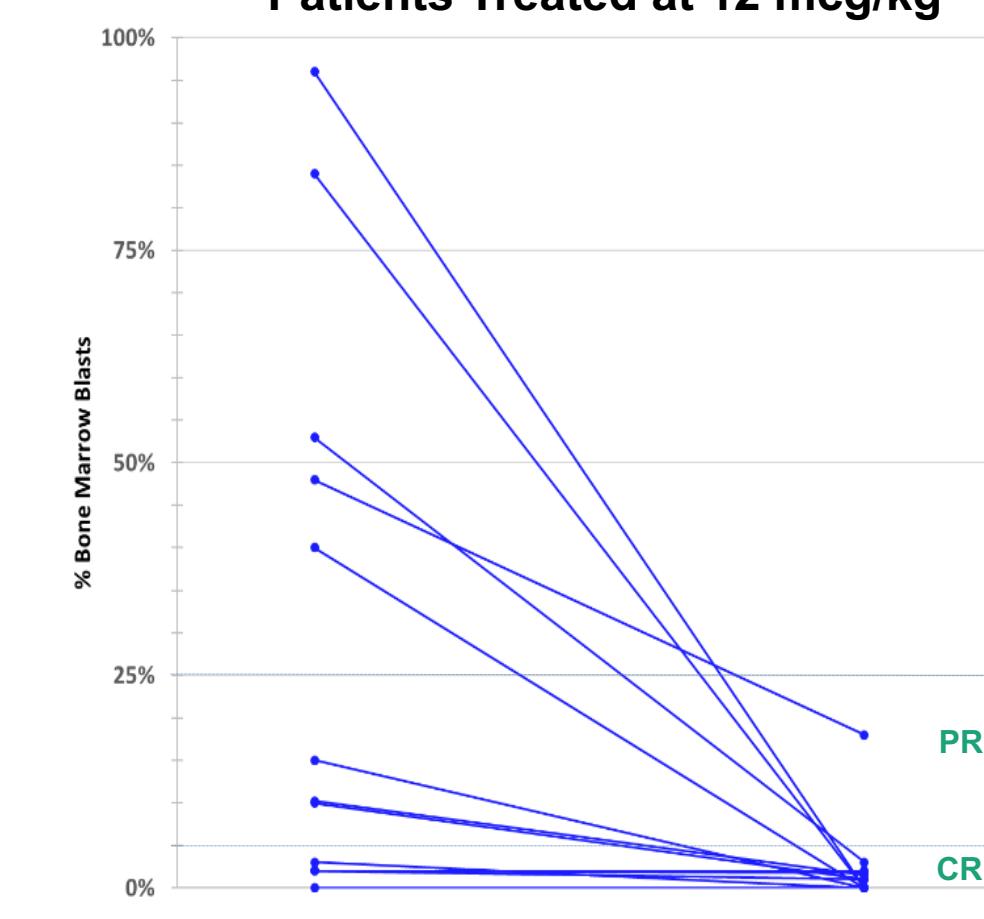


Tagraxofusp: Bone Marrow Responses

Bone Marrow Response – Baseline to Best Response Treatment-Naïve Patients Treated at 12 mcg/kg



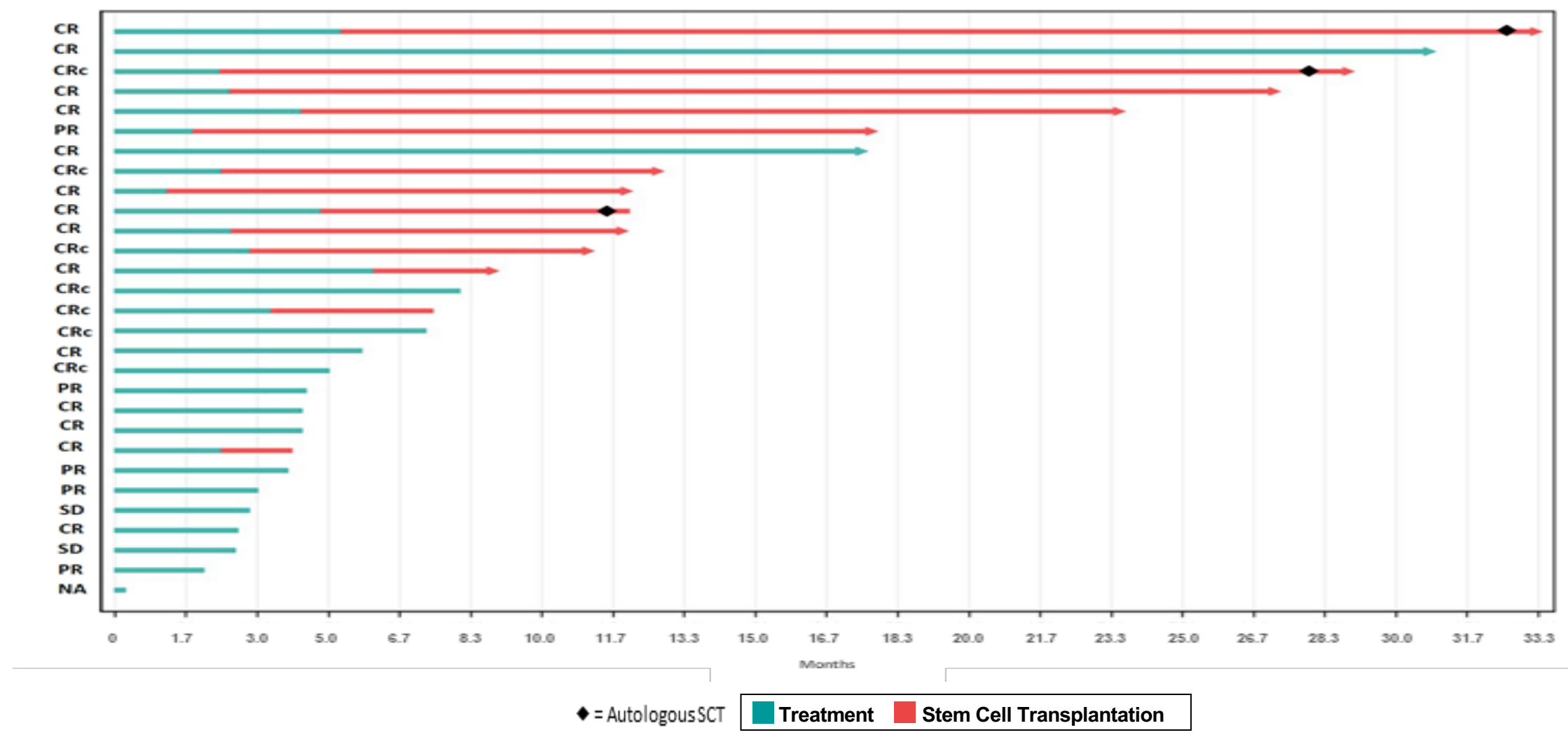
Bone Marrow Response – Baseline to Best Response Previously-Treated Patients Treated at 12 mcg/kg



N=38 evaluable patients; four patients treated with 12 mcg/kg did not have follow-up bone marrow results

Tagraxofusp: Best Response and Treatment Duration

Swimmer Plot–Best Response & Treatment Duration Treatment-Naïve Patients Treated at 12 mcg/kg



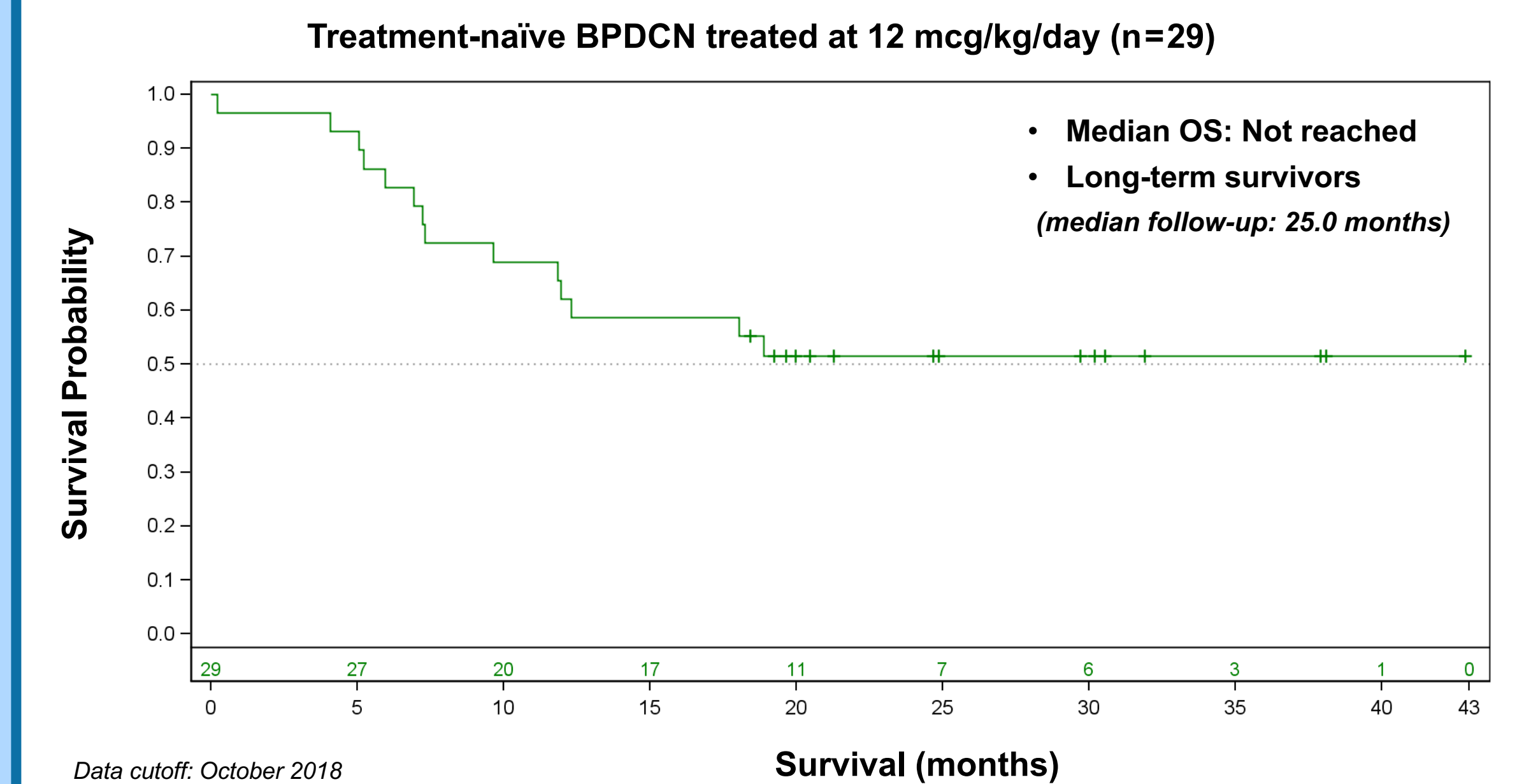
Each horizontal line represents 1 patient. Color of the bar represents first response and bridge to stem cell transplantation, if applicable. Length of bar represents follow-up through last assessment. Arrow represents patient is in remission.
Abbreviations: CR = Complete Response, CRc = Clinical Complete Response, CRi = Complete Response with incomplete blood count recovery; PR= Partial Response, SD=Stable Disease, PD= Progressive disease, NA=not assessed; outcome not assessed (patient died)

SCT Treatment Outcomes in Treatment-naïve Patients Treated at 12 mcg/kg

Patient Number	Age (years)	Best Response	Duration of Response (days)	Survival (days)
Patients Who Were Bridged to Stem Cell Transplantation				
1	65	CR	552+	608+
2	66	CRc	161+	223
3	53	PR	903+	919+
4	57	CR	601+	623+
5	65	CR	1284+	1305+
6	45	CRc	1112+	1154+
7	71	CR	297+	361
8	26	CR	757	971+
9	69	CR	485+	575
10	22	CRc	541+	561+
11	32	CRc	573+	586+
12	69	CR	910+	930+
13	72	CR	53+	124
Patients Who Were Not Bridged to Stem Cell Transplantation				
14	79	CR	727+	751+
15	31	PR	727	757+
16	73	CR	68	211
17	68	CRc	201	549
18	74	CRc	221	598+
19	63	CR	47	254
20	72	CR	1129+	1160+
21	67	CRc	112	904+
22	84	CR	75	364
23	84	PR	25	159
24	76	PR	21	181
25	61	CR	44	375
26	70	PR	43	648+

Abbreviations: CR=complete response; CRc (clinical CR) = complete response with residual skin abnormality not indicative of active disease; PR = partial response; SCT=stem cell transplant

Tagraxofusp: Overall Survival (OS)



Tagraxofusp: Summary and Conclusions

Pivotal Trial Results

- Tagraxofusp, a novel targeted therapy directed to CD123, demonstrated high levels of clinical activity in patients with BPDCN
- In previously-untreated patients:
 - 90% overall response rate (ORR)
 - Majority of responses were complete remissions (72% CR/CRc rate)
 - 45% of patients were bridged to stem-cell transplantation, including older patients who might have been excluded from intensive therapy
 - Overall survival rates of 59% at 18 months and 52% at 24 months
- 67% overall response rate in previously-treated patients
- Tagraxofusp demonstrated a predictable and manageable safety profile
 - Most common adverse reactions in patients with treatment-naïve or previously-treated malignancies treated with tagraxofusp at the labeled dose and schedule include: capillary leak syndrome (55%), nausea (49%), fatigue (45%), peripheral edema and pyrexia (each 43%)

Tagraxofusp approved and commercially available in the U.S. for BPDCN

- On the basis of these data, tagraxofusp has been FDA-approved for treatment of adult and pediatric patients, 2 years and older, with BPDCN, and is commercially available in the U.S.
- Tagraxofusp is the first and only approved treatment for BPDCN
 - Received Breakthrough Therapy Designation (BTD) designation
- Marketing Authorization Application (MAA) for BPDCN granted accelerated assessment, and under review, by the EMA

Other tagraxofusp studies

- Tagraxofusp is being clinically evaluated in additional indications including chronic myelomonocytic leukemia (CMML), myelofibrosis (MF), acute myeloid leukemia (AML), and multiple myeloma (MM)

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