

Translational Pharmacology of GB0139, an Inhaled Small Molecule Galectin-3 Inhibitor for the Treatment of Idiopathic Pulmonary Fibrosis

R.J. Slack¹, N. Hirani², M.A. Gibbons³, P. Ford¹, H. Leffler⁴, U.J. Nilsson⁴, A.J. Simpson^{1,5}, T. Sethi², A. Pedersen¹, H. Schambye¹, T. Maher⁶, A.C. MacKinnon^{1,2}
¹Galecto, Inc., Denmark, ²University of Edinburgh, UK, ³Royal Devon & Exeter NHS Foundation, Exeter, UK, ⁴Lund University, Sweden ⁵Newcastle University, Newcastle upon Tyne, UK, ⁶Royal Brompton Hospital, London, UK.

Introduction

Galectin-3 (Gal-3) is a pro-fibrotic β -galactoside-binding lectin highly expressed in the fibrotic lung & macrophages from idiopathic pulmonary fibrosis (IPF) patients¹ & GB0139 (formerly TD139) is a novel, inhaled, small molecule Gal-3 inhibitor being developed for the treatment of this disease². In this study the translational pharmacology of GB0139 from pre-clinical to clinical studies are presented.

Methods

GB0139 was evaluated in pre-clinical studies investigating Gal-3 *in vitro* affinity & potency, *in vivo* PK/PD in naïve & bleomycin-treated mice (male C57/BL6 mice)^{1,2}. A randomized, double-blind, multi-centre, placebo-controlled, phase IIa study was completed to assess safety, tolerability, & PK/PD of GB0139 in 24 patients with IPF. Three dose cohorts of 8 patients with IPF were evaluated using a 5:3 ratio (active:placebo). Inhaled GB0139 was delivered at 0.3 mg, 3 mg or 10 mg QD for 14 days. Patients underwent bronchoalveolar lavage (BAL) prior to dosing and after 14 days. GB0139 drug concentration was measured in the BAL fluid, BAL macrophages & plasma. Gal-3 expression on BAL macrophages was measured by flow cytometry & systemic biomarkers of Gal-3 inhibition & fibrosis measured in plasma.

Conclusions

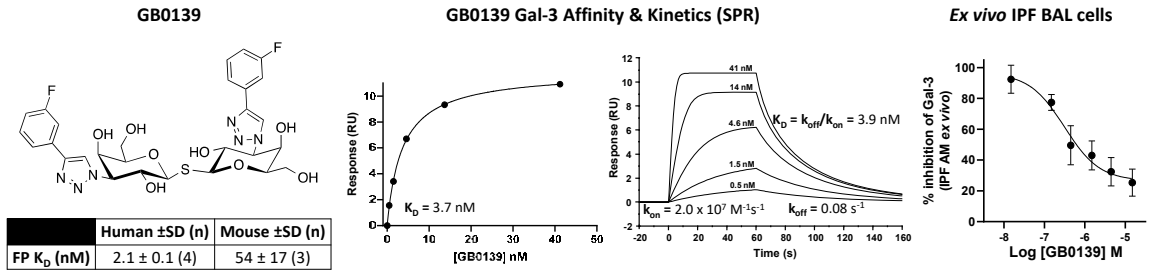
GB0139 is safe & well tolerated in man & demonstrates low systemic exposure coupled with high lung concentrations that result in suppression of Gal-3 expression on BAL macrophages & decreases in plasma biomarkers associated with IPF progression. Pre-clinical *in vitro* & *in vivo* studies have been shown to be clinically translatable. This study supported the progression of GB0139 into a phase IIb study in IPF patients³.

References

- MacKinnon AC, Gibbons MA, Farnworth SL, et al. *Am. J. Respir. Crit. Care Med.* 2012;185(5):537-546.
- Delaine T, Collins P, MacKinnon A, et al., *ChemBioChem* 2016;17(18):1759-1770.
- NCT03832946 - A Study to Test the Efficacy & Safety of Inhaled GB0139 in Subjects with Idiopathic Pulmonary Fibrosis (IPF) <https://clinicaltrials.gov/>

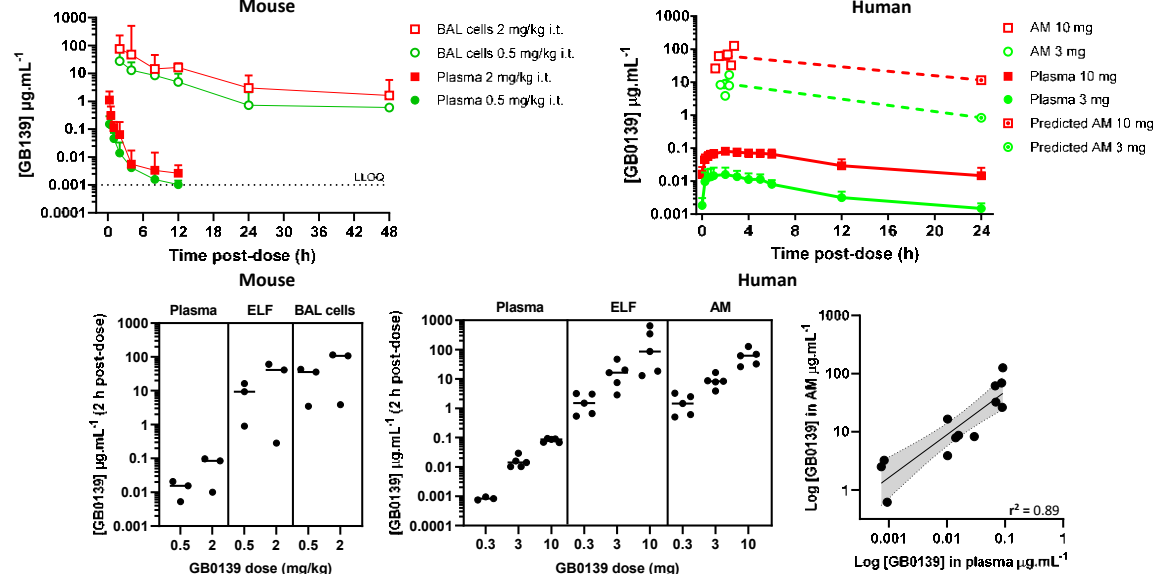
Results

In vitro pharmacodynamics



GB0139 demonstrates high affinity for Gal-3 & inhibits Gal-3 expression *ex vivo* on IPF BAL cells (IC₅₀ = 361 ± 108 nM (mean ± SD, n=3 patients)).

In vivo & clinical pharmacokinetics



In naïve C57BL6 mice, GB0139 delivered via i.t. administration was quickly absorbed & cleared from the plasma with high levels retained in the lung over 48 h. In the clinic, inhaled GB0139 was well tolerated at all doses & rapidly absorbed with concentrations in alveolar macrophages (AM) between 567- & 1,930-fold higher than systemic exposure at 2 h. AM levels correlated with plasma levels across the dosing range.

In vivo & clinical pharmacodynamics

