CD Sample tumors that are refractory/relapsed following or otherwise ineligible for standard of care therapy.

PBMCs

4.

Tsujikawa Srinivasan adminster systemically. We characterize

a

Shasqi's novel targeting agents and protodrugs. For more information about Shasqi's novel targeting agents and protodrugs, please visit posters #1540 and #4934 (available on www.shasqi.com).

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PBM: Circulating Immune Cells Profiling Suggests Absence of Systemic Immunosuppression with Activation of Anti-Tumor Responses

Samples Were Collected Across all Phase 1 Dose Cohorts

Phase 1 Study Design and Immune Profiling

Tumor Biopsy: Tumor Immune Profiling Suggests Localized T-cell-mediated Anti-Tumor Activity

CONCLUSIONS

- \(\text{PBMC}\) profiling suggests SQ3370 did not induce chemotherapy-related immunosuppression in patients receiving up to 15x the standard Dox dose, consistent with previously reported safety data. SQ3370 activated a systemic anti-tumor immune response by increasing 1) circulating T-cell populations, 2) systemic central memory and terminal effector CD8+ T-cells; with 3) a decreasing trend of the neutrophil-to-lymphocyte ratio.

- \(\text{Tumor biopsy analysis showed increased cytotoxic T-cell activity with no decrease in T-cell density after SQ3370. This result is particularly evident in patients who had received prior immune checkpoint therapy.}

- \(\text{SQ3370 promoted a shift from an immune suppressive towards a T-cell permissive tumor immune microenvironment, in part by modulating the myeloid-to-CD8+ T-cell ratio in tumors, which correlated with improved outcomes.}

- \(\text{In summary, SQ3370 treatment in the clinic did not cause immunosuppression and instead stimulated systemic and localized anti-tumor immune responses.}

- For more information about Shasqi’s novel targeting agents and protodrugs, please visit posters #1540 and #4934 (available online at www.shasqi.com).