A comparison of anabolic effects on muscle mass of wild-type ActRIIB-Fc and the novel ActRII-Fc ligand trap KER-065



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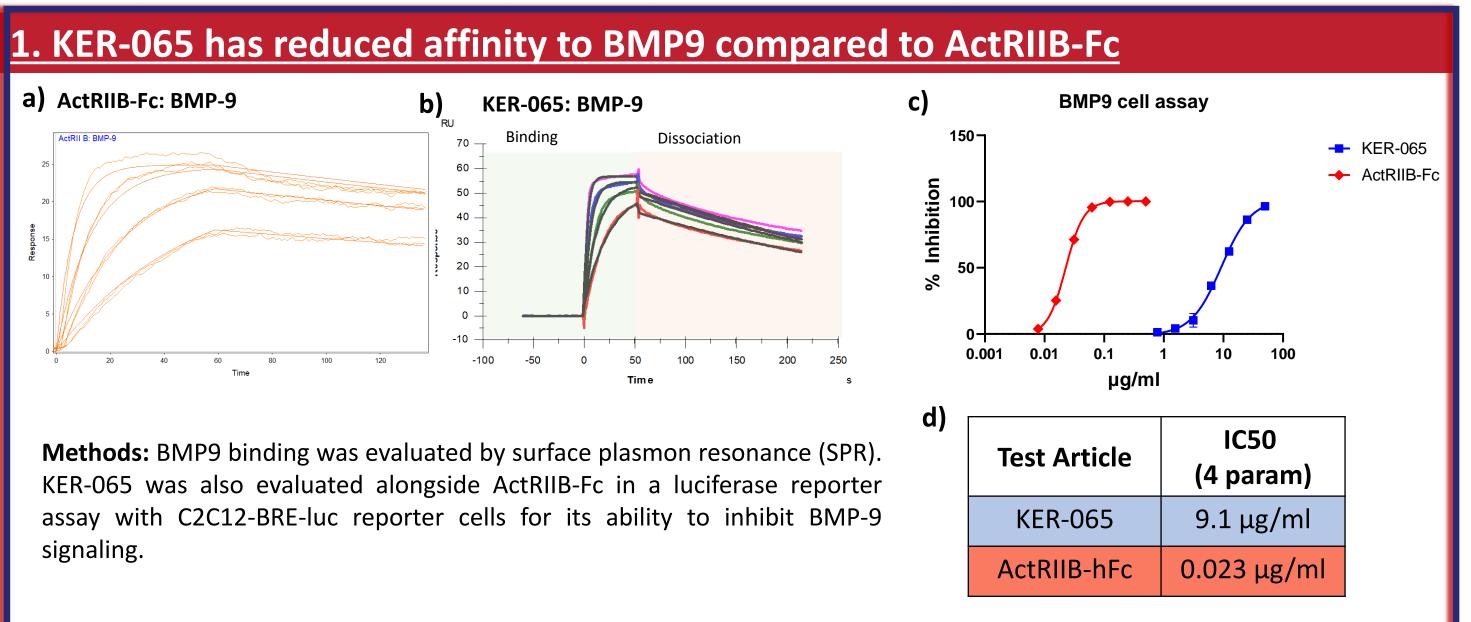
Introduction

TGF-β superfamily ligands, including myostatin and activins, that signal through ActRII receptors have been described to negatively regulate muscle mass[1][2][3]. Inhibition of these ligands has been demonstrated, through various therapeutic modalities, to increase muscle mass and strength [4].

ActRIB-Fc, a soluble form of ActRIB, functions as a ligand trap for these catabolic ligands to promote muscle growth. Inhibition of these negative regulators of myogenesis with a soluble form of ActRIB (ActRIB-Fc) increased lean mass in healthy volunteers [5] and increased muscle mass and muscle function in patients with Duchenne muscular dystrophy (DMD) [6]. However, the Phase 2 trial was halted due to adverse events of nose and gum bleeding. This effect was attributed to ActRIB-Fc inhibition of BMP9, a ligand involved in vascular remodeling.

Keros Therapeutics has generated novel investigational therapeutics based on the pharmacology of ActRIIB-Fc with reduced BMP9 binding while preserving the muscle and bone anabolic properties of WT ActRIIB-Fc. Ker-065 is a chimera of the extracellular domains of ActRIIA and ActRIIB fused to a human fc designed to maximally bind activins and GDFs with minimal BMP9 binding. RKER-065 is a research form of KER-065 that has increased muscle and bone in wild type mice.

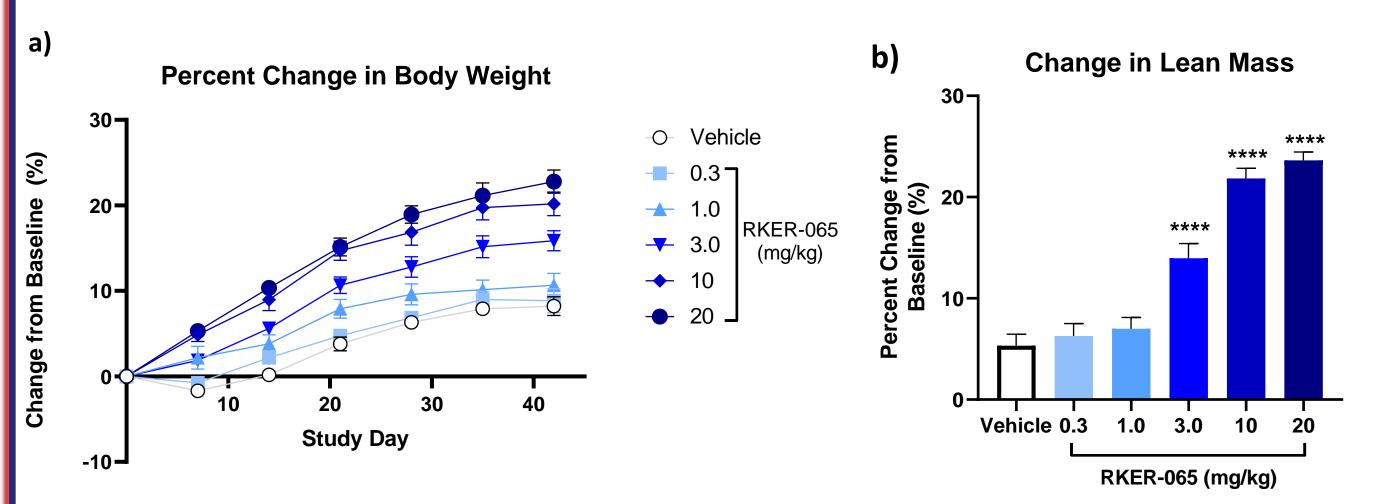
1. McPherron, A.C, et al., Nature, 1997. 2. Lin, J., et al., Biochem Biophys Res Commun, 2002. 3. Bhattacharya, I., et al., Clin Pharmacol Drug Dev, 2018. 4. Amthor, H., et al., Dev Biol, 2004. 5. Attie, K.M., et al., Muscle Nerve, 2013. 6. Campbell, C., et al., Muscle Nerve, 2017. 7. Abdulkadyrov, K.M., et al., Br J Haematol, 2014. 8. Raftopoulos, H., et al., Support Care Cancer, 2016.



Results: a) ActRIIB-Fc sensorgram of BMP9 binding profiles by Biacore at a KD value of 111 pM. b) RKER-065 sensorgram of BMP9 binding showing an increase in the rate of dissociation at a KD value of 612 pM as compared to ActRIIB-Fc. c) C2C12-BRE-luc cell reporter assays showed that ActRIIB-Fc potently inhibited BMP9 signaling, whereas KER-065-mediated inhibition was reduced. d) Calculated IC50s demonstrate that KER-065 exhibited a 400-fold lower inhibition of BMP9 compared to ActRIIB-Fc.

2. KER-065 observed to bind and inhibit negative regulators of muscle mass a) Activin A b) Activin B KER-065 was engineered to bind activins A and B, GDF-8, and GDF-11 with high affinity and reduced BMP9. sensorgrams demonstrated that KER-065 did bind a) activin A, b) activin B, c) GDF-8, d) GDF-11 with high affinity. e) KD values for SPR results using a Biacore T200 and 8k.* no dissociation was observed. f) HEK-293-SBE-luc cell c) GDF-8 d) GDF-11 reporter assays demonstrated KER-Dissociation 065-mediated inhibition of activin A, activin B, and GDF-11 ligands with IC50s of 54.3, 34.4, and 45.4 ng/mL, respectively. Due to the sequence homology between GDF-8 and GDF-11, we expect GDF-8 inhibitory results to be similar to GDF-11. **KER-065 Inhibition of Activin and GDF-11 Signaling** KD (pM) Activin A (25 ng/mL) 48 Activin A Activin B (25 ng/mL) → GDF-11 (50 ng/mL) 13 Activin B *<10 GDF-8 GDF-11

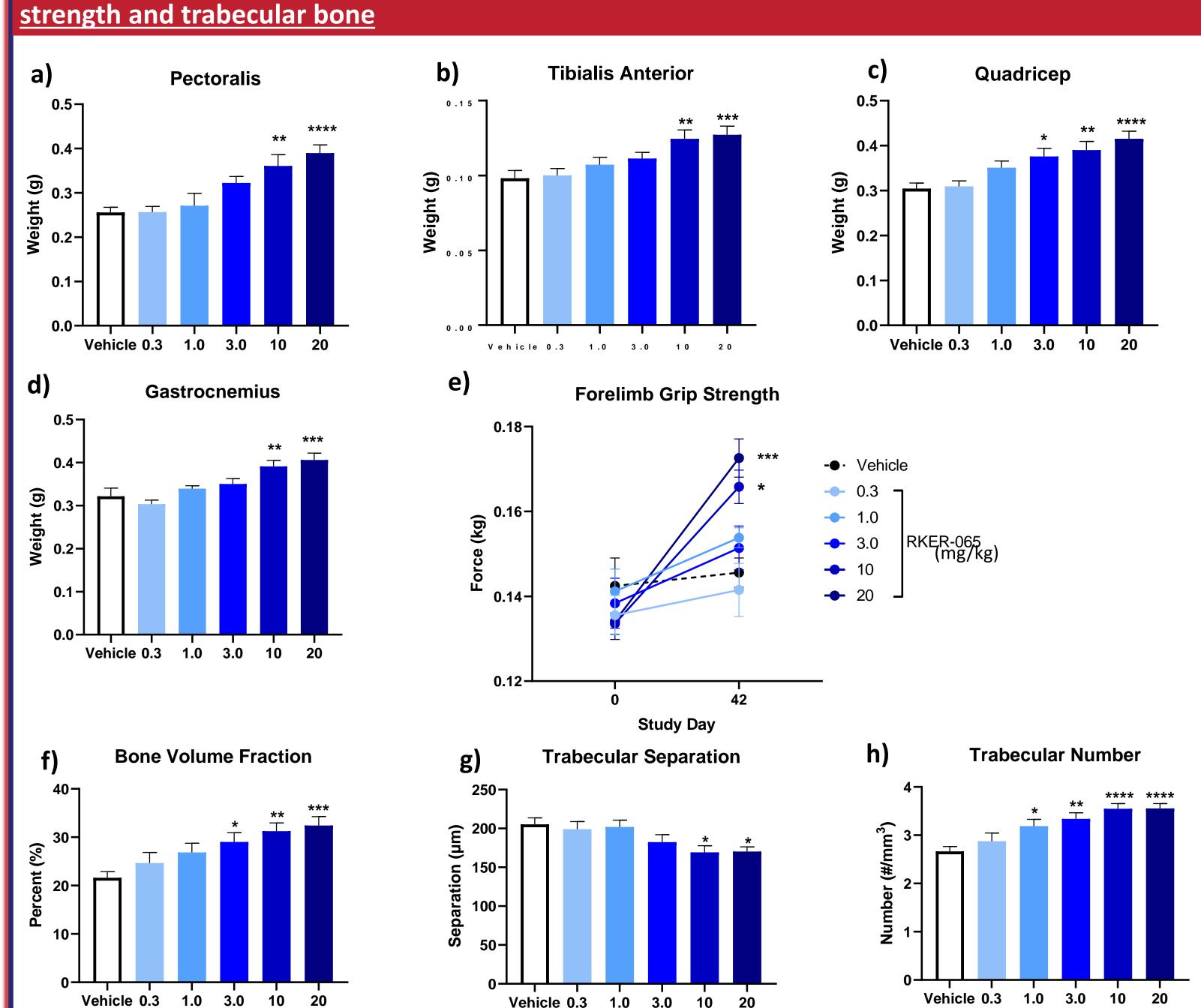
3. RKER-065 demonstrated dose-dependent increases in total body weight and lean mass



Methods: To compare the effects on muscle, 12-week-old male C57BL/6 mice were treated with vehicle (Veh; volume by weight), 0.3, 1, 3, 10, or 20 mg/kg RKER-065 QW for 6 weeks. Body mass was measured once a week while lean mass was assessed via nuclear magnetic resonance (NMR) at baseline and study termination. Mice were sacrificed 48 hours post final dose. For lean mass, an ordinary one-way ANOVA and Dunnett's multiple comparisons test. Data is shown as the mean ±SEM, **p<0.01, ***p<0.001, ****p<0.001, ****p<0.0001, ns=not significant.

Results: a) RKER-065 increased bodyweight in a dose-dependent manner. b) Increase in bodyweight was associated with a significant increase in lean mass at 3, 10, and 20 mg/kg.

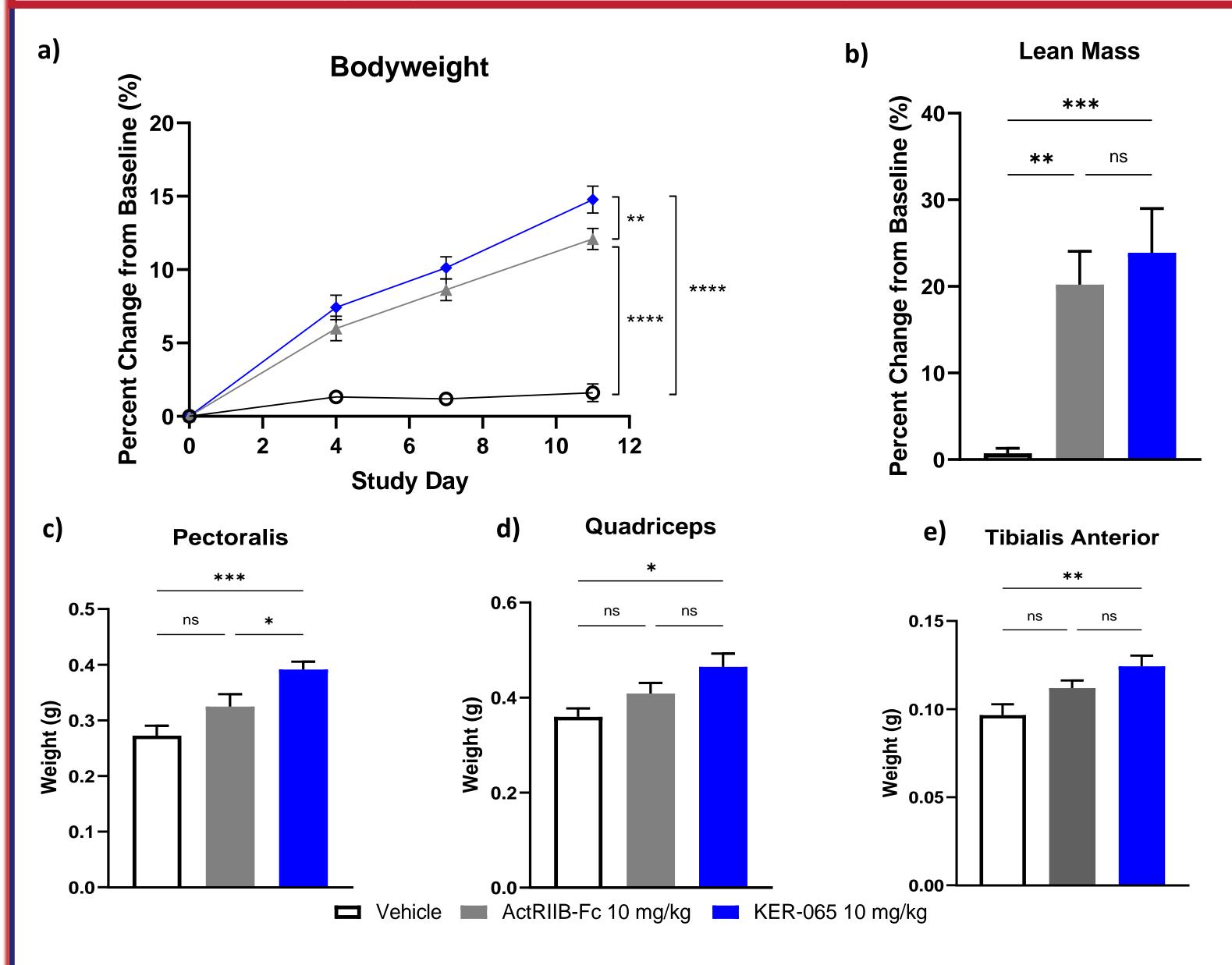
4. RKER-065 promoted dose-dependent skeletal muscle growth, a significant increase in muscle strength and trabecular bone



Methods: a-d) At study termination outlined in previous panel, mice were euthanized using CO_2 and muscles were collected and weighed. Weights listed are the average of bilateral muscles. **e)** Forelimb grip strength was measured at baseline and study termination. **f-g)** Trabecular bone microarchitecture was measured at proximal tibia via μ Ct (GX2). Statistical analysis is shown versus vehicle and was done using an ordinary one-way ANOVA and Dunnett's multiple comparisons test. Data are shown as the mean ±SEM, *p<0.05, **p<0.01, ***p<0.001, ****p<0.0001.

Results: Dose-dependent increase observed in muscle mass of a) pectoralis, b) tibialis anterior, c) quadriceps d) gastrocnemius. (e) Muscle mass increases are associated with a significant increase in functional strength. RKER-065 treatment increased bone volume, reduced trabecular separation and increased trabecular number (f-h).

5. KER-065 increased body weight and lean mass in WT mice compared to vehicle and ActRIIB-Fc



Methods: To compare the effects on muscle, 12-week-old male C57BL/6 mice were treated with ActRIIB-Fc, KER-065 (10 mg/kg) or Vehicle (Veh; volume by weight) QW for 12 days. Body mass was measured twice a week while lean mass was assessed via nuclear magnetic resonance (NMR) at study termination after a total of 4 doses. Mice were sacrificed 48-72 hours post final dose. Statistical analysis was done using a 2-way ANOVA and Tukey's multiple comparisons for body mass. For lean mass, an ordinary one-way ANOVA and Dunnett's multiple comparisons test. Data is shown ±SEM, *p<0.05, **p<0.01, ***p<0.001, ns=not significant.

Results: a) KER-065 percent change in bodyweight from baseline was significantly increased when compared to vehicle and ActRIIB-Fc. b) This increase in weight can be attributed to a significant increase in lean mass. c-e) As seen in previous studies, increases in skeletal muscle mass correlated with increases in lean mass.

Conclusions

- KER-065 was engineered to have reduced BMP9 binding while retaining strong affinity to activins A and B, GDF-8 and GDF-11.
- Preclinical studies demonstrate RKER-065 treatment led to robust increase in body mass, muscle mass, functional strength, and bone formation.
- These results suggest Keros Therapeutics can leverage its proprietary discovery approach to generate ligand traps that could potentially treat musculoskeletal disorders while limiting the adverse events associated with BMP9 inhibition.

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