

# ORIC-101 Overcomes Glucocorticoid-Driven Resistance to Androgen Receptor Inhibition in CRPC

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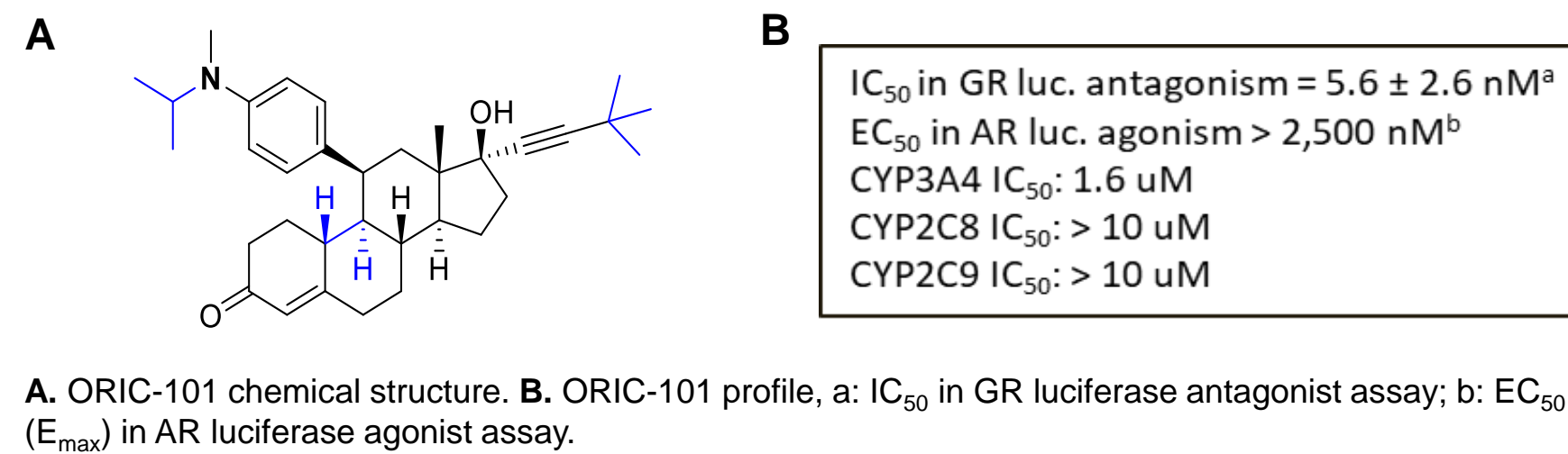
## BACKGROUND

Prostate cancer is the second leading cause of cancer-related death in men. Second-generation antiandrogens such as enzalutamide and abiraterone benefit patients with castration-resistant prostate cancer (CRPC). However, relapse eventually occurs (Giacinti S et al, 2018).

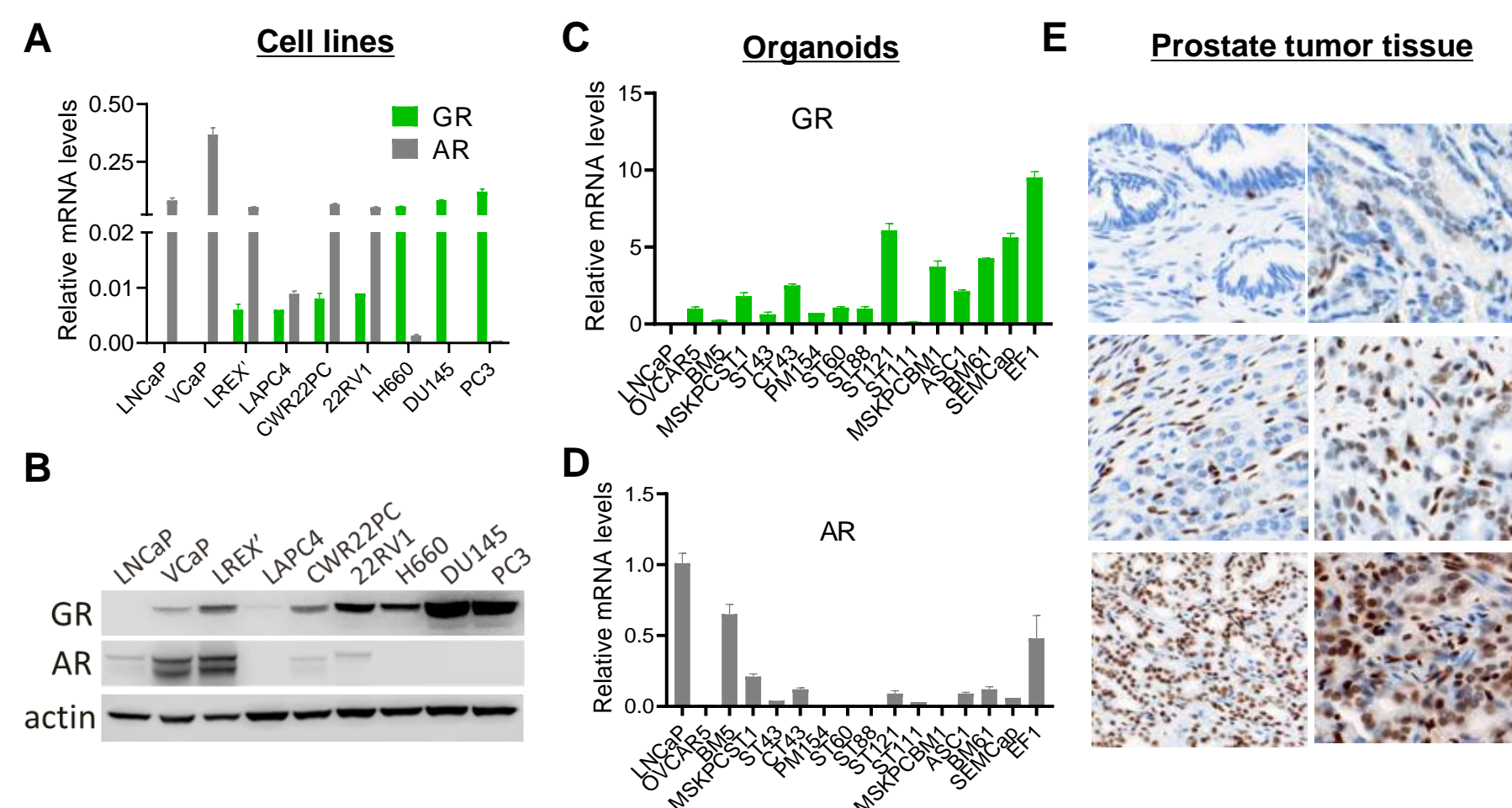
The glucocorticoid receptor (GR) has been identified as a potential antiandrogen bypass mechanism, and thus GR inhibition may overcome this resistance to restore or prolong antiandrogen sensitivity (Arora V et al, 2013, Isikbay M et al, 2014).

- **ORIC-101 is a selective and potent GR antagonist without androgen receptor (AR) agonism, making this compound particularly suitable for combination with enzalutamide (Rew Y et al, 2018).**
- **ORIC-101 showed good safety, pharmacokinetic properties, and target engagement in phase 1a healthy volunteer studies.**
- **A phase 1b study of ORIC-101 in combination with enzalutamide is planned in patients with metastatic prostate cancer.**

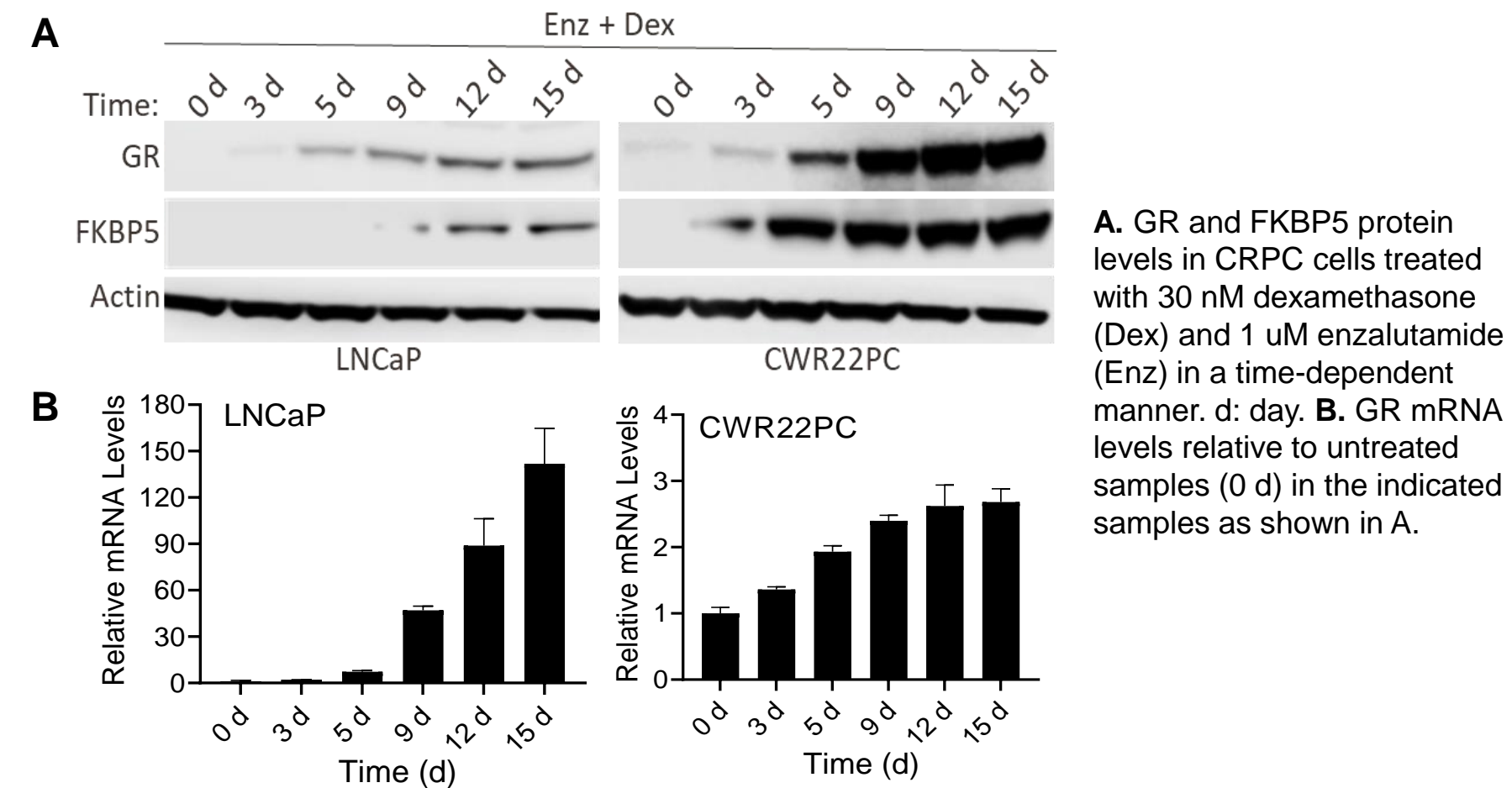
## ORIC-101 is a selective and potent GR antagonist



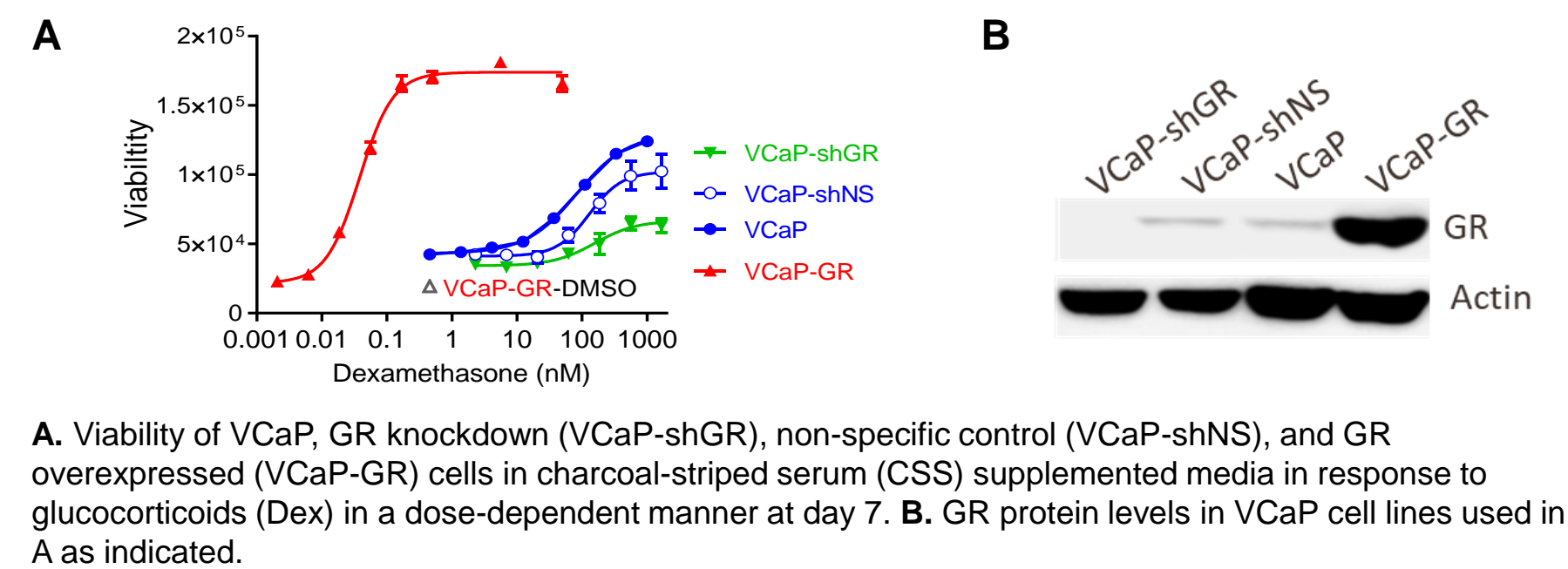
## GR is widely expressed in prostate tumors



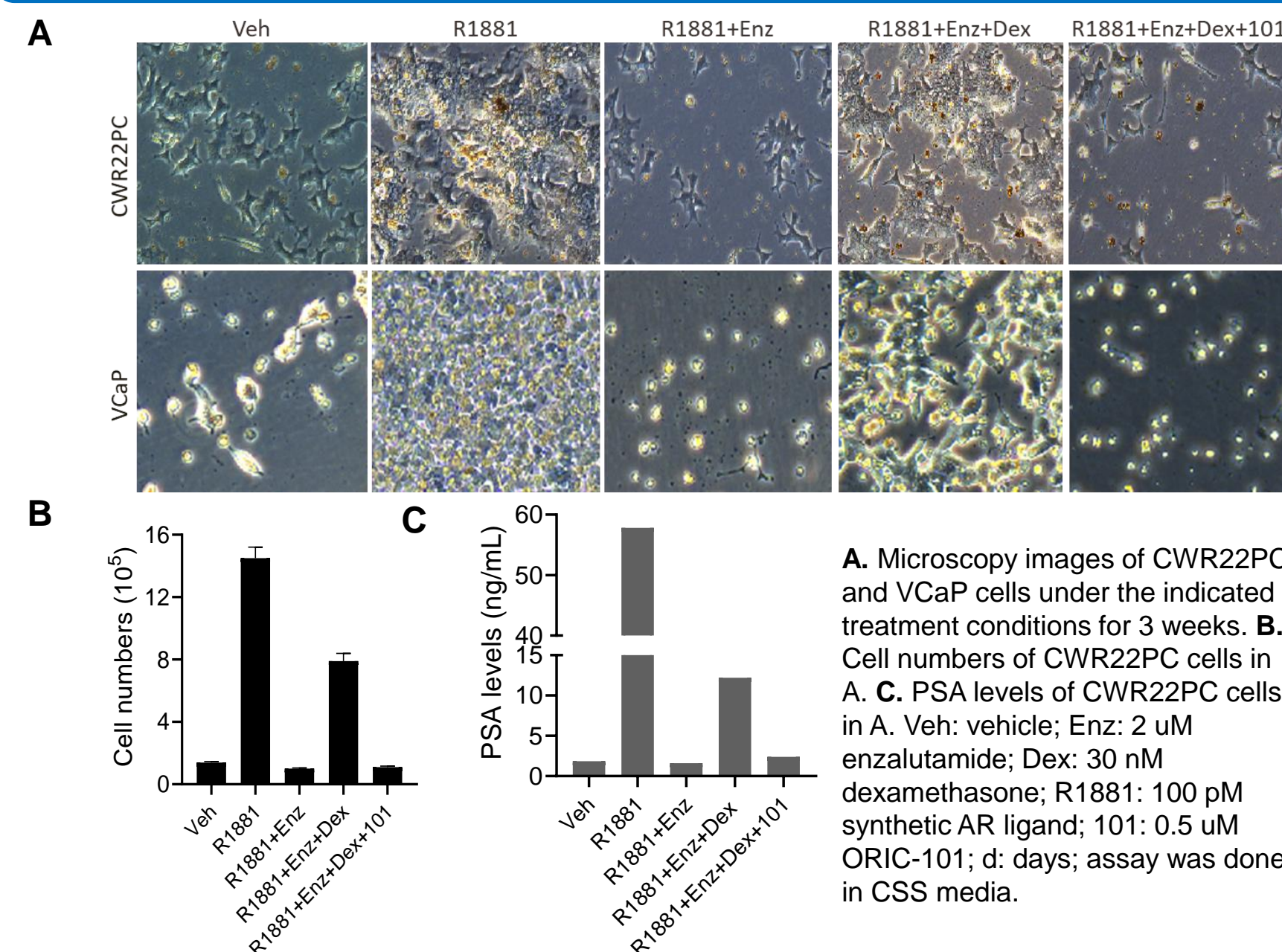
## AR inhibition upregulates GR levels in CRPC cells



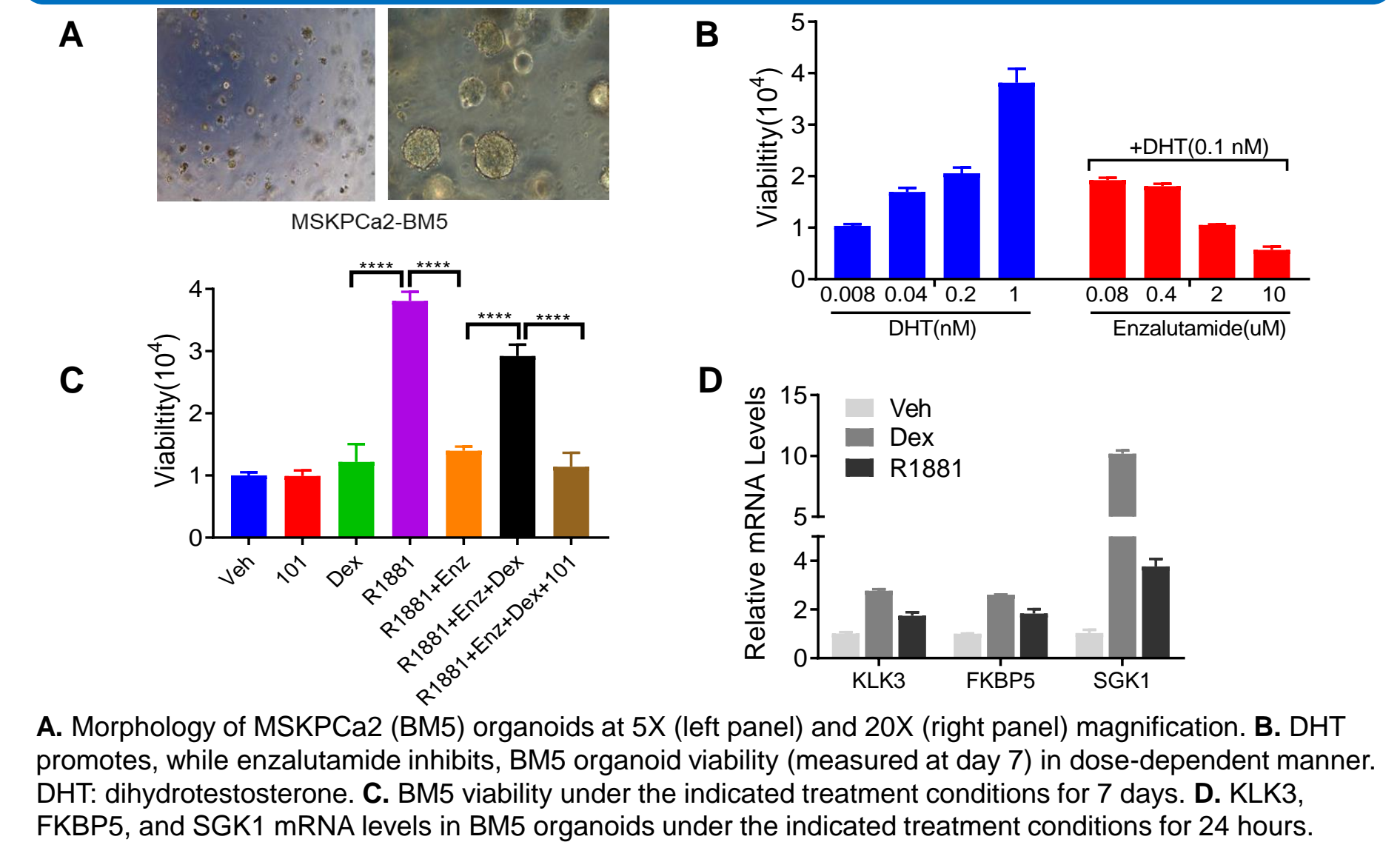
## GR levels correlate with Dex-driven CRPC viability



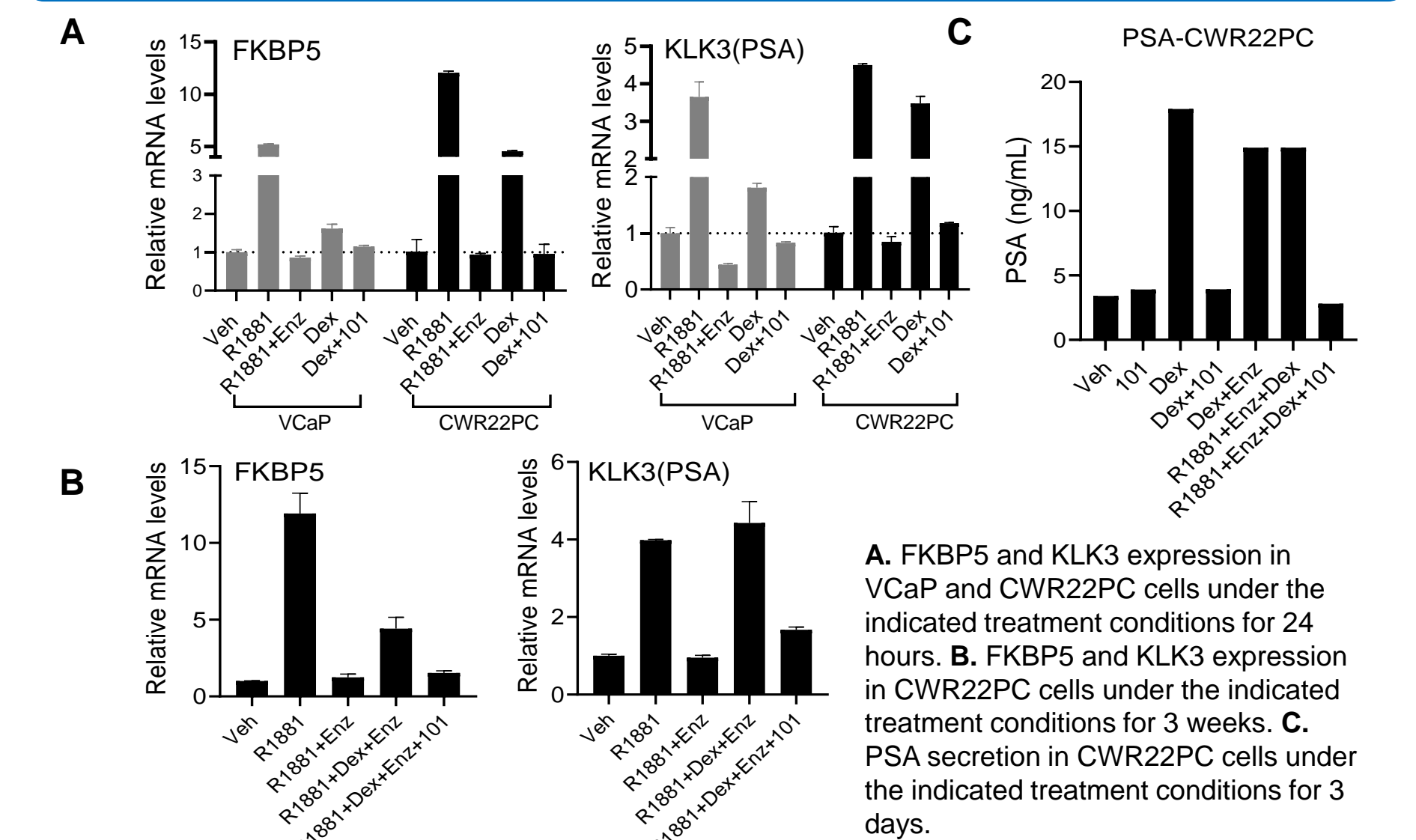
## ORIC-101 reverses GR-driven resistance to enzalutamide in CRPC cells



## ORIC-101 reverses GR-driven resistance to enzalutamide in CRPC organoids



## FKBP5 and KLK3 are biomarkers for ORIC-101 in CRPC



## CONCLUSIONS

- GR is widely expressed in prostate tumor cell lines, organoids, and tissue.
- AR inhibition leads to enhanced GR levels at mRNA and protein levels.
- GR levels correlate with glucocorticoid-driven CRPC viability.
- ORIC-101 reverses GR-driven resistance to enzalutamide in CRPC cells and organoids.
- FKBP5 and KLK3 are rational pharmacodynamic biomarkers that may be evaluated in clinical studies of ORIC-101 in CRPC.