**BACKGROUND**

- Immunosuppressive adenosine generation from adenosine monophosphate (AMP) requires the activity of the cell surface ecto-5'-nucleotidase, CD73.
- Relapsed/refractory multiple myeloma (RRMM) is adenosine rich.

**PATIENT POPULATION**

- Data cutoff Nov 2, 2023 (n=22); PK/PD analyses include data through dose level 4 (1600 mg) (n=19).
- Pharmacokinetics
- ECOG 0-2
- Measurable disease

**PATIENT VIGNETTES**

- 59% received prior anti-BCMA/CD3 bispecific or BCMA CAR-T therapy.
- 96% penta-refractory BCMA CAR-T therapy.

**ORIC-533 PHARMACOKINETICS**

- Initial evidence of immune activation in the majority of patients treated at 1200 or 1600 mg QD.
- Complete/substantial inhibition of CD73 activity in serum and BM.
- At doses of a 1200 mg, evidence of immune modulation of CD8+ T cells and NK cells.
- At doses of 1600 mg, meaningful reductions in sBCMA levels, suggestive of anti-myeloma activity.
- Preliminary evidence of clinical anti-myeloma activity, including reductions in paraprotein, demonstrated in multiple patients with RRMM.

**ORIC-533 IMMUNE CELL ACTIVATION (T CELLS)**

- **ORIC-533 IMMUNE CELL ACTIVATION (NK CELLS)**

**CONCLUSIONS**

- **ORIC-533 IMMUNE CELL ACTIVATION (T CELLS)**

- **ORIC-533 IMMUNE CELL ACTIVATION (NK CELLS)**