



ACCRF Overview

Jeff Kaufman, Executive Director

The Roots of ACCRF



ACCRF was founded by Marnie and Jeff Kaufman. Marnie was diagnosed with ACC at 38 years old when she had four boys under the age of 10.

ACCRF is a public charity established in December 2005 in Needham, Massachusetts, USA



ACCRF Overview

MISSION

Accelerate the development of **better treatments and a cure** for ACC patients

GOAL

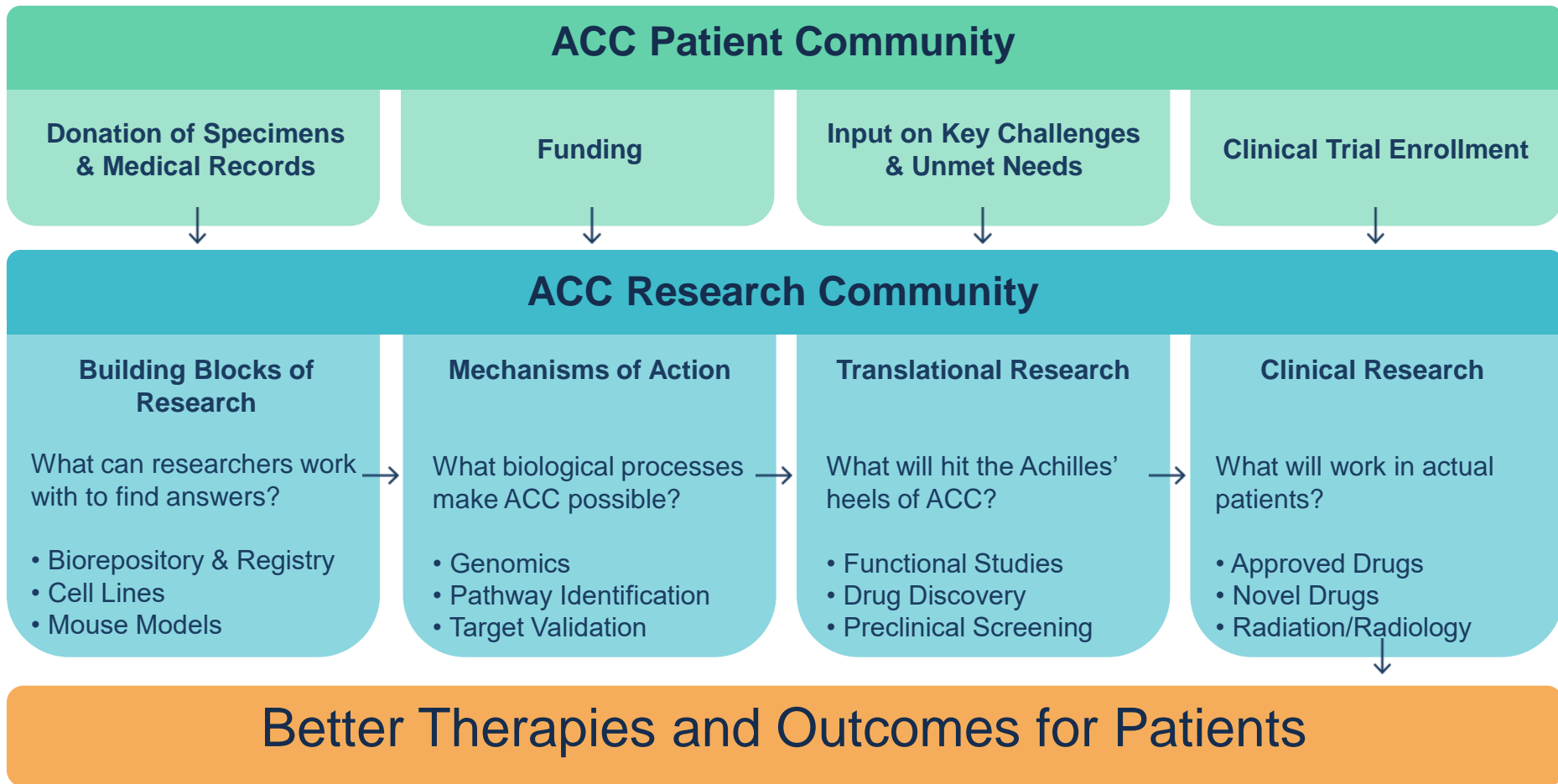
Develop a **pipeline of clinical trials** based on the best available science

STRATEGY

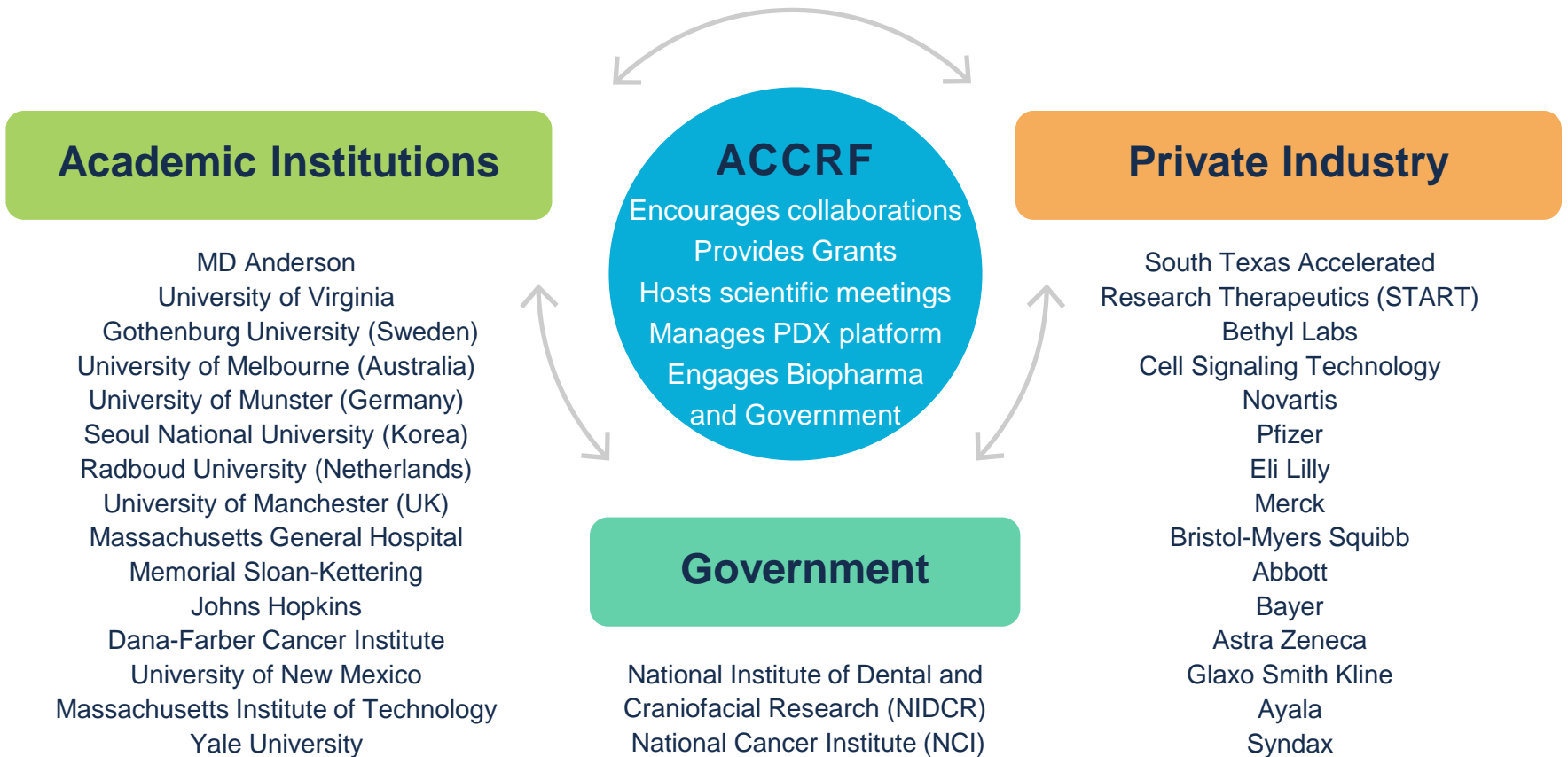
Create a **community of researchers** following a **coordinated plan** that is driven by **supportive and supported patients**



ACCRF Research Agenda



ACCRF Research Network

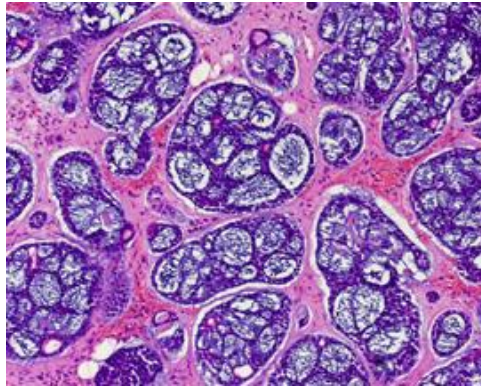


ACComplishments

	2005	2018
Biobanking	Limited	Repositories with hundreds of frozen tumor specimens
Cell Lines	Multiple invalid models	Misidentifications discovered; valid models developed
Animal Models	None	20+ mouse xenografts developed; first transgenic models
Genomics	Sporadic reports of translocations	<ul style="list-style-type: none"> • Discovery of recurrent MYB, MYBL1 and NFIB fusion genes • Identification of additional molecular targets with potential therapies: NOTCH, FGFR, IGF-1R, HDAC
Preclinical Drug Screens	None in valid models	<ul style="list-style-type: none"> • Open xenograft platform for academia and industry • Strong relationships with biopharmaceutical companies • 100+ anti-cancer compounds screened in mouse models
Mobilizing Patients	Limited	Tissue donations, clinical trial accrual and \$15 million in donations
NIH Commitments	Negligible	Over \$25MM for salivary gland tumor research (NIDCR)
Clinical Trials	Few, small & haphazard	Multiple science-driven trials with improved designs, enrollment, data quality and patient outcomes

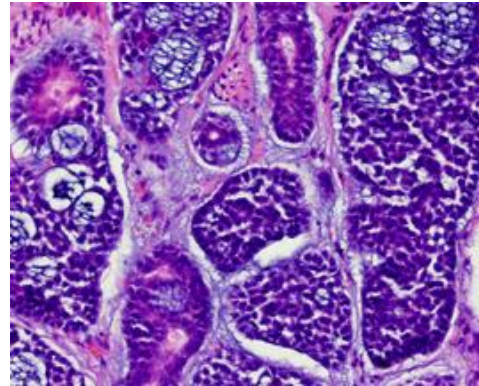


How we think ACC works



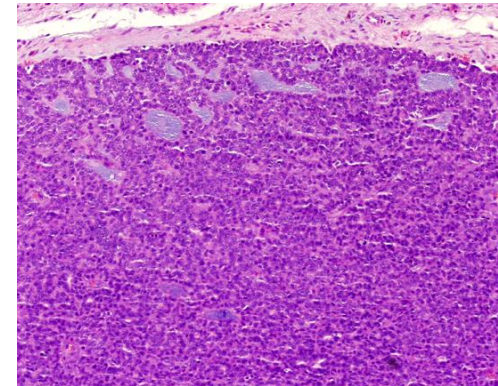
Grade 1
No solid component

MYB or *MYBL1*
fusion or overexpression
(90-95% of cases)



Grade 2
<30% solid

Secondary alterations in other genes
(*NOTCH1*, *FGFR*, *IGF*, *PI3K* and chromatin modifiers)
drive disease progression



Grade 3
>30% solid

Therapies:

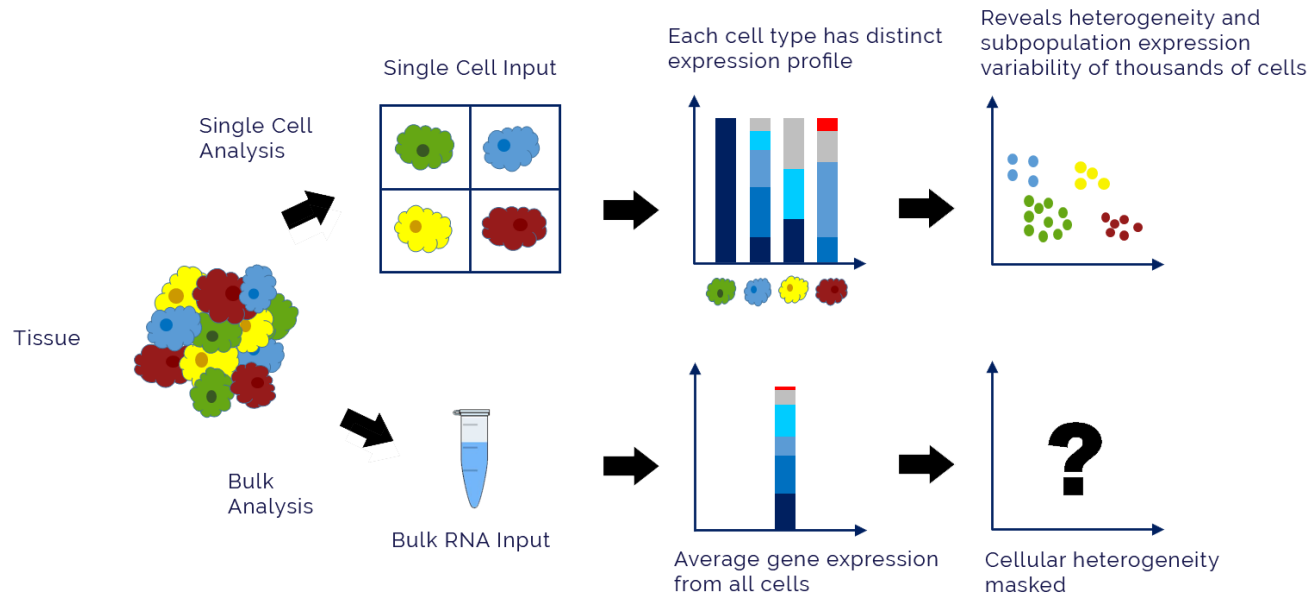
Research grants focused on
finding **MYB/L1 inhibitors**

NOTCH inhibitors show early signal in NOTCH-mutant ACCs
Clinical trials are investigating other **targeted and immune
therapies** in ACC



Some Basic Research Questions

- Do genes other than MYB or MYBL1 cause ACC?
- Do genes other than NOTCH1-4 cause ACC to be more aggressive?
- How do ACCs in various body sites differ?
- How do the 2 types of cells in ACC differ and interact?



2018 Reported ACC Trials

Drug	Targets	Study Location	ACC Patients	Partial Response	Progression Required
Lenvatenib (Lenvima)	VEGFR, FGFR, PDGFR, KIT	New York, USA	32	16%	Yes
Lenvatenib (Lenvima)	VEGFR, FGFR, PDGFR, KIT	Milan, Italy	28	11%	Yes
Apatinib	VEGFR	Shanghai, China	56	47%	No
Pembrolizumab (Keytruda) and Vorinostat (Zolinza)	PD-1, HDAC	Seattle, USA	12	8%	Yes

Partial Response is tumor shrinkage $\geq 30\%$



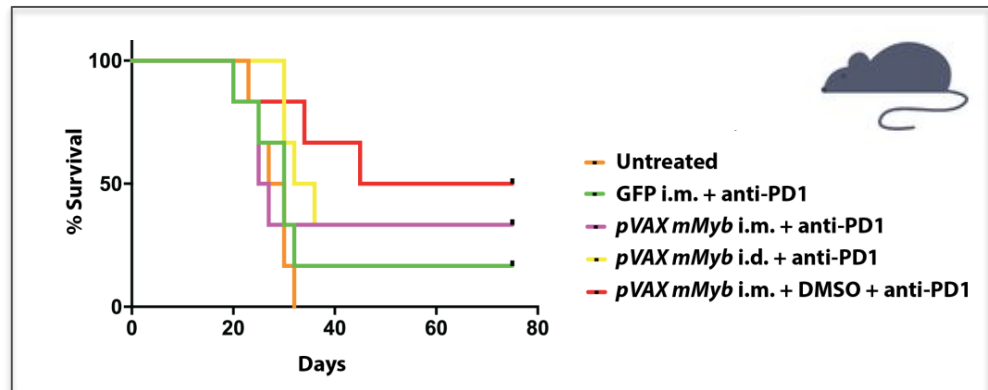
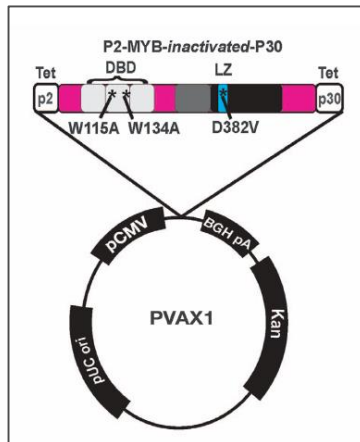
Open Trials

- **MYB**
 - **MYB vaccine and Tislelizumab (PD1 inhibitor)**, Phase I, Peter Mac Cancer Center, Melbourne, Australia
- **NOTCH**
 - **AL101 (NOTCH inhibitor)**, Phase II, Honor Health, Scottsdale, Arizona, with more sites to open through end of 2018/beginning 2019
 - **CB-103 (NOTCH inhibitor)**, Phase I, Netherlands, Spain, and Switzerland
- **Immunotherapy**
 - **Pembrolizumab (PD1 inhibitor) plus Docetaxel**, Phase II, U of Chicago, Chicago, IL
 - **Pembrolizumab (PD1 inhibitor) plus Radiation**, Phase II, DFCI, Boston, MA
 - **Nivolumab (PD1 inhibitor) plus Ipilimumab**, Phase II, Northwestern, Chicago, IL
- **HDAC**
 - **Chidamide (HDAC inhibitor) plus Cisplatin**, Phase II, Chinese Academy of Medical Sciences, Beijing, China



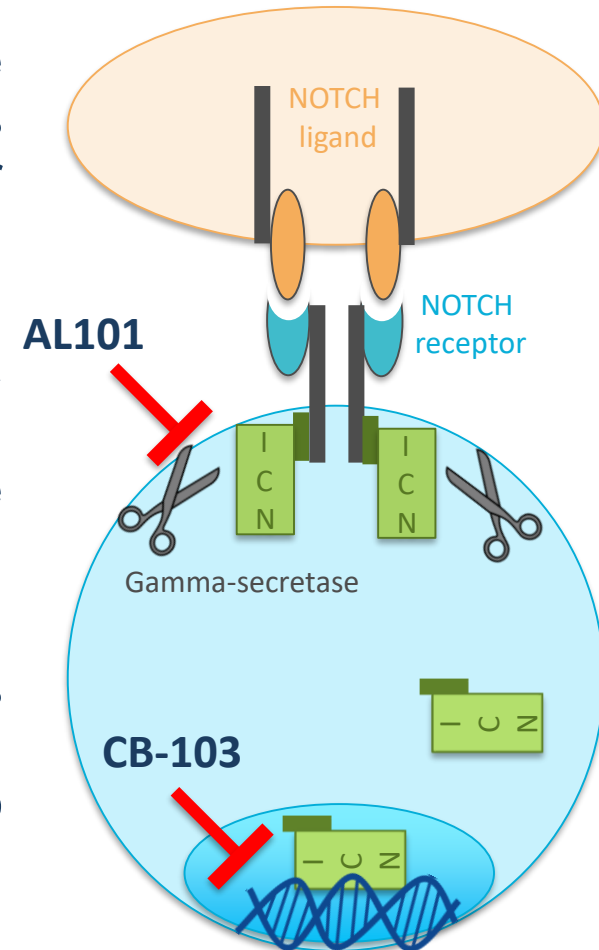
MYB DNA vaccine + PD-1 inhibitor

- **Rationale:** MYB is an oncogenic driver in several cancers (ACC, colon, T-ALL, etc.). 90-95% of ACC tumors overexpress MYB/L1.
- Vaccine designed to overcome the “self” antigen nature of MYB.
- Phase I trial opened for patients with advanced solid cancer including colon and ACC (Peter Mac Cancer Center, Australia).
- 1st metastatic ACC patient treated in September.



NOTCH inhibitors (AL101 and CB-103)

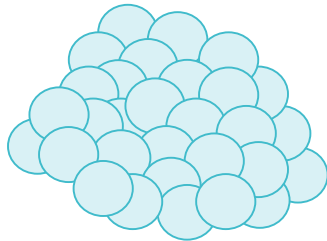
- **Rationale:** Activating NOTCH1 mutations are enriched in recurrent/metastatic ACC patients (22%) and define a subset of patients with poor prognosis
- **AL101 (GSI)** Phase II trial is open to ACC patients with activating mutations in NOTCH 1, 2 3 or 4. Open in US now, possibly in Europe late next year
- **CB-103 (pan NOTCH inhibitor)** Phase I trial is now open to patients with solid tumors in Europe. ACC cohort tentatively scheduled to open in US and Europe in 2019.



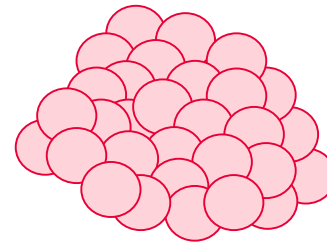
Immunotherapy Trials

Rationale:

“COLD”



“HOT”



NOT recognized by immune system

Low mutational burden

Microsatellite stable

Low immune cell infiltration

No PD-L1 (ACCs do have PD-1 and PD-L2)

Recognized by immune system

High mutational burden

Microsatellite unstable

High immune cell infiltration

High PD-L1 and PD-1

- **Pembrolizumab (PD1 inhibitor) plus Docetaxel**, Phase II, U of Chicago, Chicago, IL
- **Pembrolizumab (PD1 inhibitor) plus Radiation**, Phase II, DFCI, Boston, MA
- **Nivolumab (PD1 inhibitor) plus Ipilimumab (CTLA4 inhibitor)**, Phase II, Northwestern, Chicago, IL and MSK, New York, NY (recently completed)
- **What is different about ACC tumors from *exceptional responder* patients?**



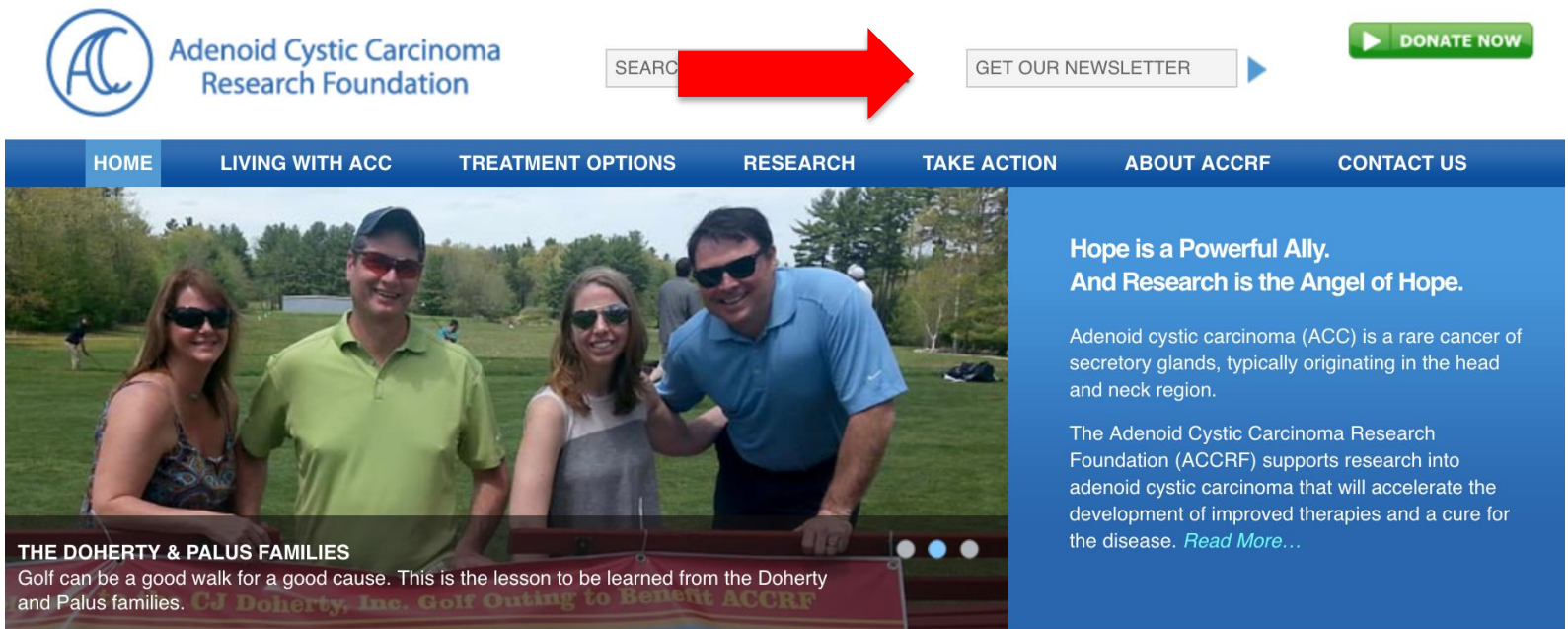
Forthcoming Trial Concepts

- Combinations of immunotherapy with targeted drugs that are active in ACC
- MDM2 inhibitor
- Entinostat (HDAC inhibitor) plus Cisplatin
- Targeted delivery of radiation using PSMA radiolabeled drugs (for ACCs with high PSMA levels)
- ATRA
- Plus more in the pipeline...





Keep yourself updated...

- Sign up to receive ACCRF research updates via email...



Adenoid Cystic Carcinoma Research Foundation

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THE DOHERTY & PALUS FAMILIES
Golf can be a good walk for a good cause. This is the lesson to be learned from the Doherty and Palus families. *CJ Doherty, Inc. Golf Outing to Benefit ACCRF*

**Hope is a Powerful Ally.
And Research is the Angel of Hope.**

Adenoid cystic carcinoma (ACC) is a rare cancer of secretory glands, typically originating in the head and neck region.

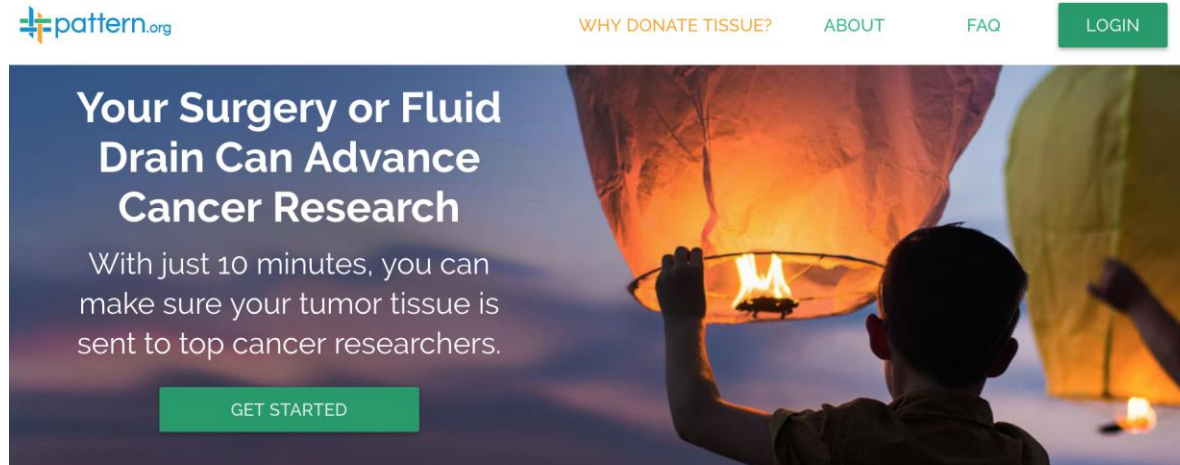
The Adenoid Cystic Carcinoma Research Foundation (ACCRF) supports research into adenoid cystic carcinoma that will accelerate the development of improved therapies and a cure for the disease. [Read More...](#)

- Check the “Clinical Trials - Current Studies” section on our website!



Tumor donation options

- Online-consented tumor donation with *Pattern.org*



- The Christie NHS in Manchester, UK (Rob Metcalf's lab)

<https://www.accrf.org/take-action/assist-in-research/>



Summary

- ACCRF has jump-started the field of ACC research through:
 - World-class Scientific Advisory Board driving a directed agenda
 - Creation of biobanks, preclinical models and research network
 - Target discovery and validation leading to clinical trials
- ACCRF is prioritizing therapy discovery and innovative clinical trials, with several promising concepts in development
- We ask for your support to achieve our goal of having the **first approved therapy for ACC by 2020**





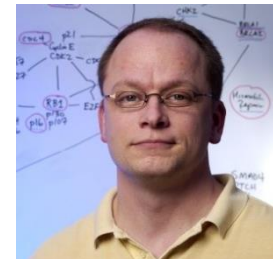
Adel El-Naggar



Chris Moskaluk



Göran Stenman



Andy Futreal



Michael Wick

Thanks to ACC Research Heroes!



David Sidransky



Lillian Siu



Bruce Chabner



Robert Haddad



Ned Sharpless



Gigi Lozano



Irwin & Joan Jacobs

*ACC*elerate the *CURE*