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This press release is an English translation of a Japanese-language press release. The official language of this press release is Japanese, and the Japanese version takes precedence over the English version in terms of content and interpretation.

<Press Release>
11th October 2024

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Chordia to Present Results of Phase 1 Clinical Trial of CLK Inhibitor CTX-712 at the 2024 The 86th Annual Meeting of the Japanese Society of Hematology

Kanagawa Japan

11th October 2024 – Chordia Therapeutics Inc. (Head Office: Fujisawa City, Kanagawa Prefecture; President: Hiroshi Miyake) announce that it presented the results of an analysis of 14 patients with hematologic malignancies from a Japanese Phase 1 clinical trial of its CLK inhibitor, CTX-712, at the 86th Annual Meeting of the Japanese Society of Hematology being held at the Kyoto International Conference Center from October 11 to 13, 2024.

This presentation builds upon the results presented at the American Association of Cancer Research (AACR) Annual Meeting in April 2024. The analysis was updated based on data as of July 5, 2024, and the results were reported for the first time in Japan.

Result Summary

- Our lead pipeline CTX-712 was confirmed proof of concept (POC) in a First in Human Phase 1 clinical trial conducted in Japan.
- The primary adverse event associated with CTX-712 treatment was gastrointestinal toxicity, which was manageable with concomitant antiemetic therapy.
- Six out of 14 patients (42.9%) had a response, including four patients in complete remission. The median duration of treatment in patients who had a response was 164 days.
- Three out of four patients (75%) with splicing mutations had a response, indicating that higher response rates could be achieved with patient stratification.

Title: Efficacy and Genetic Analysis of First-in-Human Phase I Study of CTX-712 in R/R AML/MDS

We have already reported that the first-in-human Phase 1 clinical trial of the CLK inhibitor CTX-712 was conducted in Japan and that 60 patients (including 46 with solid tumors and 14 with hematologic malignancies) had been enrolled by November 20, 2023. In this presentation, we reported the results of safety, efficacy, and genetic analysis of 14 of those patients with hematologic malignancies as of July 5, 2024.

Patient Background

All 14 hematologic cancer patients had advanced, relapsed, or refractory disease after prior therapy. 12 had acute myeloid leukemia (AML) and 2 had myelodysplastic syndrome (MDS). 9 of the 12 AML patients (75%) had genetic characteristics associated with poor prognosis based on the ELN 2017 guidelines, and the 2 MDS patients were classified as “very high” in the international prognostic scoring system (IPSS-R). Six of the 14 patients received 105 mg of CTX-712 and 8 patients received 70 mg of CTX-712 on an intermittent twice-a-week schedule.

Safety

One patient receiving 105 mg of CTX-712 developed pneumonia, which was considered a dose-limiting toxicity (DLT). Patients receiving 70 mg did not develop DLTs. CTX-712-related adverse events were primarily gastrointestinal toxicities, including nausea, vomiting, and diarrhea, but were controllable with concomitant use of antiemetic agents and had an overall acceptable safety profile. Tumor lysis syndrome (TLS: Toxicity caused by the rapid and massive killing of cancer cells by anticancer agents, resulting in abnormalities such as increased uric acid in the body and imbalance of electrolytes such as potassium, calcium, and phosphorus) occurred in four other patients, but this was interpreted as being caused by the effect of CTX-712 antitumor response.

Efficacy

Among 14 patients, four patients achieved complete remission (CR), one patient achieved complete remission with incomplete hematologic recovery (CRi), and one patient achieved morphologic leukemia-free state (MLFS). The overall response rate was 42.9% (6/14). The median duration of treatment for responders ranged from 14 to 924 days, with a median duration of 164 days.

Genetic Analysis

To detect genetic changes in cancer cells, we conducted a comprehensive cancer genome screening panel and analyzed 275 genes involved in cancer development. As a result, four patients were found to have mutations in genes responsible for RNA splicing (splicing mutations), and three of them responded (75%), indicating that stratifying patients by splicing mutations can potentially increase the response. In all

four patients with splicing mutations, CTX-712 treatment reduced tumor volume in the bone marrow, with a median blast count reduction of 92.79%. The median Overall survival (OS) was not reached in patients with splicing factor mutations (95% CI 9.56 months - NR), whereas the median OS was 4.37 months (95% CI 1.64 months - NR) in patients without splicing factor mutations.
Genetic mutations other than splicing mutations, such as ASXL1, TP53, and RUNX1, were detected in the responders, but their relevance to the efficacy of CTX-712 is still under investigation.

Our CEO Hiroshi Miyake said, “we are pleased that our CLK inhibitor CTX-712 has shown high efficacy in patients with leukemia who have exhausted standard therapies in clinical trials conducted in Japan. I would like to thank all the patients and healthcare professionals who cooperated in the study. We will continue our efforts to ensure progress in the ongoing Phase 1/2 clinical trial in US and to make CTX-712 a new treatment option for patients with relapsed and refractory leukemia.”

About Chordia Therapeutics

Chordia is a clinical stage biotech company based in Fujisawa, Kanagawa Prefecture, Japan, engaged in the research and development of novel therapies for cancers.
Chordia’s lead asset, CLK inhibitor CTX-712, is under Phase 1/2 clinical study in the US. CTX-712 potentially targets the vulnerability of cancer and is expected to deliver benefits to patients of various types of cancer. In addition to CTX-712, Chordia is engaged in the research of several preclinical assets, including CTX-439, a CDK12 inhibitor, which is expected to be effective in cancers with specific abnormalities, as well as GCN2 inhibitors. For more information, please contact our website https://www.chordiatherapeutics.com/en/.