# **B<sup>3</sup> Therapeutics**

## Bypassing the blood brain barrier

For the treatment of primary CNS tumors, brain metastases, and debilitating genetic diseases

Blavatnik 2024-2025 | Ranjit Bindra, MD, PhD

## **Seasoned Founding Team**

Expertise spanning the bench to bedside to biotech



#### Mark Saltzman, PhD

Goizueta Foundation Professor Yale School of Biomedical Engineering

Leader in nanoparticle engineering and novel drug delivery systems



#### Ranjit Bindra, MD, PhD

Harvey and Kate Cushing Professor Yale School of Medicine Therapeutic Radiology, Neurosurgery

Leader in brain tumors and DNA damage repair

#### YALE VENTURES

Shannon Anderson, PhD, Business Development

Robert Williams, PhD, Blavatnik Fellow



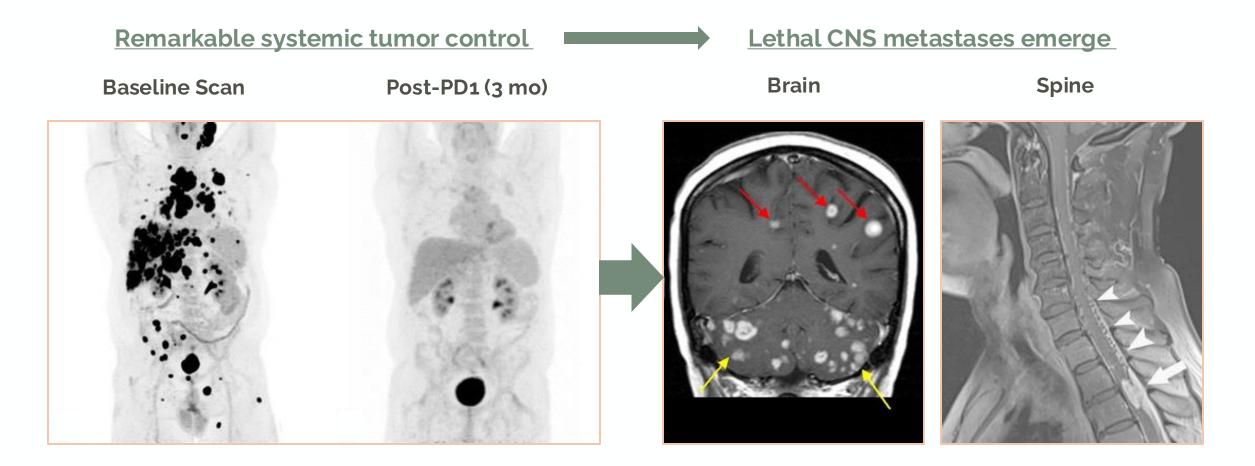
#### Kevin Rakin

Partner - HighCape Capital

Experienced Serial Entrepreneur and investor

### The Problem: Controlling Cancer Spread in the CNS

><u>5% of all cancer patients</u> develop CNS metastases, accounting for <u>~100-200,000 new patients</u> diagnosed each year



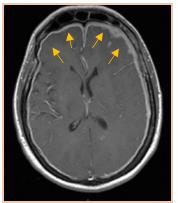
### Urgent Unmet Need: effective therapies for brain tumors

Most adult and pediatric CNS cancers are difficult to treat, and patients rarely survive more than 1-2 years



Glioblastoma and other Primary Brain Tumors Deadliest and most common adult brain cancer Median Overall Survival: 8-12 months (GBM) Standard of Care: surgery, radiotherapy (RT) chemotherapy, Bevacizumab

Prevalence: 25,000 new cases per year in USA



Brain Metastases and Leptomeningeal Disease (LMD) Occurs in 5% of all cancer patients Median Overall Survival: 3-9 months

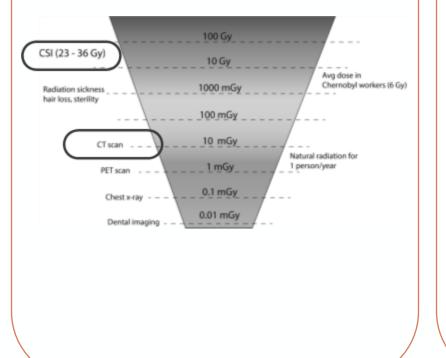
**Standard of Care**: radiotherapy, intrathecal + systemic chemotherapy

Prevalence: 200,000 new cases/yr in USA

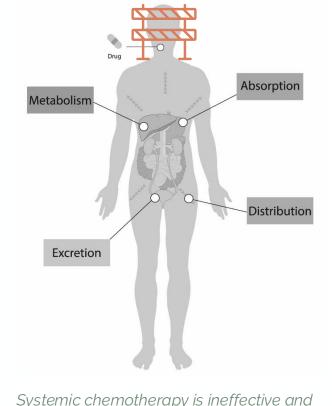
### Limited treatment options for CNS tumors with poor overall survival

### Current options are *ineffective* for CNS tumor control

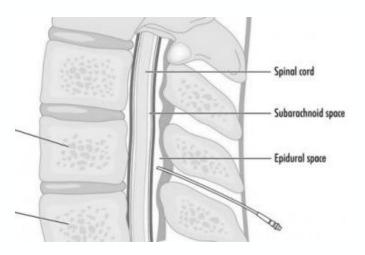
Radiotherapy is ineffective and significantly reduces cognitive performance



> 98% of all drugs delivered systemically do not reach the brain



Drugs are cleared rapidly when administered directly into the CSF

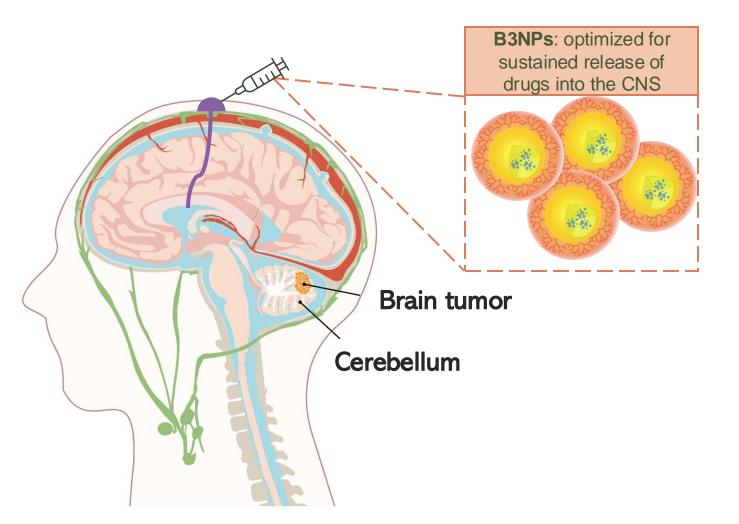


Opioid Drug	Half-life in CSF	Duration of action 12-24 hrs	
Morphine	90 min		
Meperidine	68 min	1-3 hrs	
Sufentanil	100 min (after epidural)	1-3 hrs	

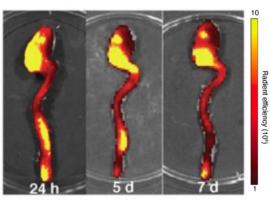
Systemic chemotherapy is ineffective and accompanied by severe side effects

### Solution: CNS-directed, sustained release nanoparticles (NPs)

B3NPs distribute throughout the brain and spinal cord following intrathecal (IT) administration



- Composed of a biodegradable polymer based on materials <u>widely used in FDA</u> <u>products</u>
- Distributed throughout the CNS and <u>retained for >3 weeks</u> after one injection
- Limited systemic exposure
- Compatible with multiple drug modalities

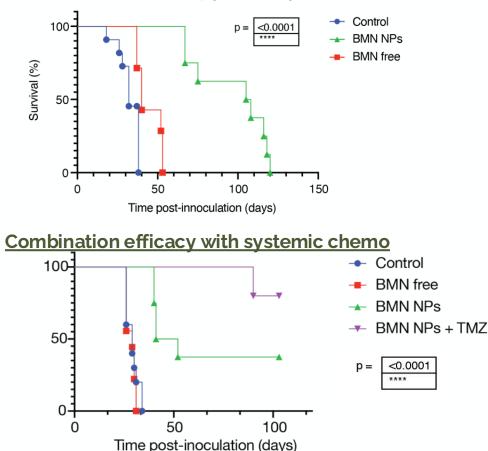


Khang et al, Science Translational Medicine 2023

PCT US 2016/031890 (treatment of gliomas, exp. 2035); PCT US 2023/079181 (leptomeningeal tumors, exp. 2042)

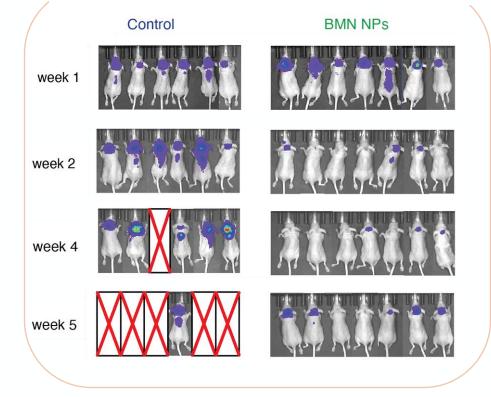
# Administration of PARPi encapsulated in B3NPs significantly improves survival

<u>A single dose of B3NP-encapsulated</u>, FDA-approved PARP inhibitor (BMN-673) <u>significantly improves survival</u> as a monotherapy or combined with chemotherapy in an orthotopic mouse model of medulloblastoma



Monotherapy efficacy

### Remarkable monotherapy tumor control



Khang et al, Science Translational Medicine 2023

	B3NP	Intrathecal Radioligand/Abs	Other NPs	Ab Transport Vehicles (Denali)	Systemic Chemotherapy
<b>CNS</b> Penetration	high	high	low	low	low
Duration of Effect	high	low-mid	mid	unknown	low
Toxicity	low	high	mid	unknown	high
Broad Applicability	yes	no	varies	yes	yes

### **Commercial opportunity**

<u>Effective</u> brain cancer therapies and CNS delivery technologies are commercially viable

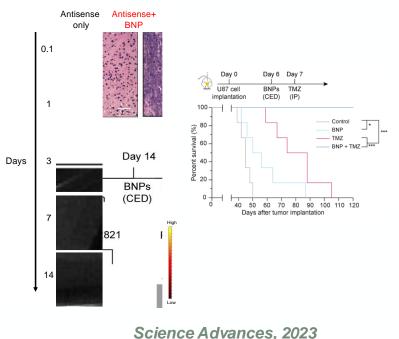
Modifi§Bio JEUVLI \$6.85B CNS cancer healthcare costs THERAPEUTICS **\$1.3 B acquisition** \$471M acquisition **\$1.4B** acquisition Q4 2024 Q4 2024 2018 **\$2B** Brain tumor **Preclinical Preclinical Preclinical** therapeutics Merck acquired Modifi Denali acquired F-AbbVie acquired \$840M Bio to continue **BBB**-accessing star's CNS delivery development of novel technology for \$1.4B technology Drug delivery of GBM small molecule cash brain tumor therapy therapeutics

### **B3NPs are compatible with multiple therapeutic modalities**

**DNA Oligonucleotides** 

PLA-HPG NPs

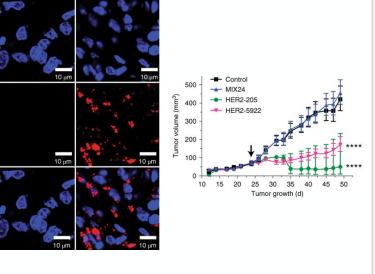
Anti-Sense Oligonucleotides



UT

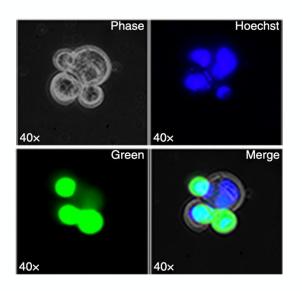
Idec

TAMRA-HER2-205



#### Nature Biotechnology, 2021

**Plasmid DNA** 



Mol. Can. Ther., 2016

B3NPs also offer a sustained release advantage for IT-administered treatments for several diseases beyond cancer...

### **Broad Intellectual Property Protection**

Protection for current B3NP and any future optimization; for use with any small molecule or nucleic acid <u>All Yale IP</u>

Lead B3NP Formulation

Patent Family 1: Foundational Compositions of Matter and Methods of Use Published 2015

Patent Family 2: Compositions and methods for treatment of Gliomas National Phase filings begin May 2025 Published 2017

### Patent Family 3:

Compositions and methods of use for treatment of leptomeningeal tumors Published 2024

**Future filings:** Manufacturing, classes of compounds, additional disease areas Additional B3NP Formulations -

#### Patent Family 4:

#### **Compositions of Matter:**

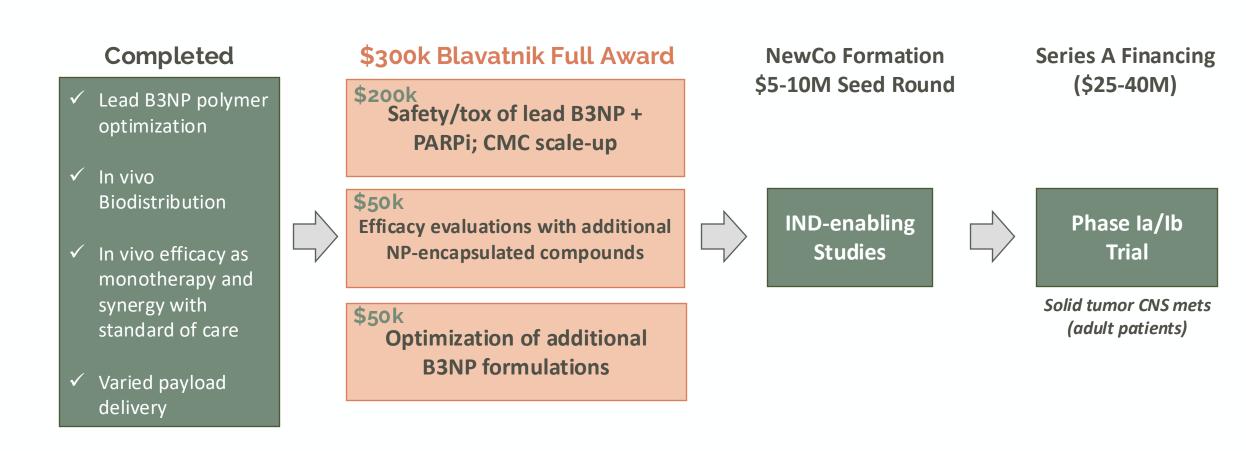
PEG-based Bottlebrush Block Copolymers for the Formation of Long-Circulating Nanoparticles Filed 2024

#### Patent Family 5: Compositions of Matter:

Novel biodegradable and biocompatible polyethylene glycol ethylenebrassylate-codioxanone polymer for fabrication of nanoparticles in drug delivery Filed 2024

## Blavatnik award de-risks lead B3NP and enables development of additional formulations

Combining B3NP with FDA-approved, off-patent PARPi for an Orphan indication is cost- and time-efficient





### **Efficient Path to the Clinic**

Combining B3NP with FDA-approved, off-patent PARPi for an Orphan indication is cost- and time-efficient

Drug Candidate

#### **Completed:**

- ✓ Lead B3NP polymer optimization
- ✓ In vivo Biodistribution
- In vivo efficacy as monotherapy and synergy with standard of care
- ✓ Payload encapsulation optimization

