long infusion times for patients. Strong motivation thus exists for the design of new anti-topo I agents that stabilise cleavable complexes without the drawback of hydrolytic lability problems.

NU:UB 235, a spacer-linked, conformationally restricted anthracenedione conjugate of the unnatural amino acid norvaline, is representative of a new rationally designed series of topoisomerase I inhibitors.

NU:UB 235 has broad spectrum cytotoxic potency against a panel of human and animal tumour cell lines, with mean Gl_{50} value $\sim 1~\mu M$ in the NCI 60 cell line panel and transplantable, refractory MAC15A adenocarcinoma of the colon.

Enzyme-mediated relaxation of supercoiled pBR322 plasmid by either topo I or the α or β -isoforms of human topo II at concentrations up to 100 μM was not observed with NU:UB 235, compared to standard agents. However, the norvaline conjugate stabilised cleavable complex formation in vitro and reproducibly gave mean increases of 170% in nicked plasmid formation compared to 80% with camptothecin at equimolar concentrations (50 $\mu\text{M})$. This approximately 2-fold increase over camptothecin was observed also with the alternative ϕ X174RF plasmid.

Additionally, NU:UB 235 stabilised cleavable complex formation with topo I in intact HL60 leukaemic cells [following 45 minute exposure at 200 $\mu M].$ At equimolar concentrations, immunoband band depletion, by NU:UB 235, of the topo I Western blot signal in HL60 extracts exceeded (by 5-fold) that produced by camptothecin. The level of DNA damage induced by topo I poisoning is consistent with the non-intercalating, DNA groove-binding properties (Q_{50} value 0.9 μM for Hoechst 33258 displacement) of NU:UB 235, measured by fluorescence quenching.

Continuing pre-clinical development is warranted, given the demonstration that structurally stable NU:UB 235 is an effective non-camptothecin topo I poison.

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Pharmacokinetic study of the distribution, metabolism and excretion of non-radiolabeled DX 8951f following repeated intravenous administration to patients with solid tumors

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Background: The novel camptothecin derivative, DX 8951f (exetecan; D), is a potent topoisomerase I inhibitor with activity in the treatment of solid tumors. A pharmacokinetic (PK) study was designed to characterize the distribution, metabolism and excretion of *non-radiolabeled D* administered intravenously over 30-minutes daily for 5-days every 3 weeks by determining: the plasma PK, urinary and fecal excretion of D, D lactone and the two known metabolites of D, UM1 and UM2. Concentrations of D in saliva and *in vivo* plasma protein binding were also determined.

Methods: Patients were stratified into minimally (MP) and heavily pretreated (HP) groups based on prior treatment. Starting doses of D for MP and HP were 0.5 mg/m²/day and 0.3 mg/m²/day, respectively. Since D is predominantly metabolized by CYP3A4 and CYP1A2 enzymes, the enzyme activity was assessed in each patient pre-treatment by erythromycin breath test and caffeine urinary test, respectively. Limited blood samples were collected post-treatment, from days 1–6. Urine was collected continuously for 10-days and feces for 10–14 days during course 1. Saliva was collected at baseline and concomitantly with plasma samples, on day 1. Patients were hospitalized for up to 14 days of course 1. A recovery of 70% of D and its metabolites in all bodily secretions was defined as the apriori mass balance target.

Results: Twelve patients; 5σ':7⁹; median age 57 (range 20–66); ECOG PS 0–1 (n=10), 2 (n=2) received 29 courses (median 2.5; range 1–5) of D. Tumor histology were pancreas (2), hepatocellular (2), renal/adrenal (2), gall bladder (1), esophageal (1) and others (4). Grade 4 neutropenia and thrombocytopenia were the predominant hematologic toxicities. Nonhematologic toxicities included nausea, emesis, fatigue and abdominal

cramps. Overall, the total drug recovery ranged from 21.4 to 57.7% of the total administered dose of D. About 10% of D was eliminated unchanged in urine. UM1 and UM2 metabolite appeared to account for up to 25% and 15% of the total D administered, respectively. The PK parameters Clearance, half-life and Vss estimated noncompartmentally for D were within 2 standard errors of the values previously reported. The plasma exposure to UM-1 and UM-2 was approximately 4.3% and 1.3% of the parent compound.

Conclusions: Up to 57.7% of the administered dose of D is recovered in urine, feces and emesis fluid. Because less than 70% of the administered dose is accounted for by the parent drug and the two major metabolites, additional as yet unrecognized excreted metabolites may be present.

Topoisomerase II inhibitors

5 POSTER

Induction of unique structural changes in guanine-rich DNA regions by the triazoloacridone C-1305, a topoisomerase II inhibitor with potent activity toward solid tumors

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C-1305 is a triazoloacridone with excellent activity in lung and colon cancer models. We have recently reported that C-1305 is a topoisomerase II poison which is able to induce topoisomerase II-mediated cleavable complexes *in vitro* as well as in living cells. An unusual feature of C-1305 is the induction of low levels of very toxic cleavable complexes in tumor cells. To explore the molecular mechanisms underlying this phenomenon, we have investigated the *in vitro* sequence specificity of DNA binding for C-1305 and other triazoloacridones in comparison with classical topoisomerase II inhibitors and other DNA binders.

A 3'-end labelled 176 bp DNA fragment from pBluescript plasmid was used for studies on drug-DNA interactions. To determine the sequence specificity of DNA binding of triazoloacridone derivatives, DNA footprinting, chemical probing of DNA with DEPC and osmium teraoxide were used. Surface plasmon resonance (SPR) experiments were undertaken to determine the DNA binding affinity of C-1305 and C-1533 compounds. For determination of structure-activity relationship, thermal denaturation and chemical probing with DEPC was performed for a series of triazoloacridone.

Compound C-1305 shows almost 10 times higher preference for GC rather than AT DNA sequences as revealed by SPR (K=3.0×10 5 M $^{-1}$ for GC-rich DNA compared to 4.9×10^4 M $^{-1}$ for AT-rich DNA). Chemical probing with DEPC showed that C-1305 induced structural perturbations in DNA regions with at least three consecutive guanine residues. This effect was detectable already at nanomolar concentrations of C-1305 and was highly specific for the C-1305 derivative, since none of the 22 other DNA-interacting drugs tested were able to induce similar structural changes in DNA. Structure-activity relationship studies with a series of triazoloacridone derivatives representing different chemical structures indicated that a hydroxyl group in the 8 position of the triazoloacridone ring as well as an aminoalkyl side chain containing three methylene groups are crucial for the unusual interaction of C-1305 with guanine-rich DNA regions.

We here show that the topoisomerase II inhibitor triazoloacridone C-1305 binds strongly to DNA at guanine-rich regions resulting in unique conformational alterations. Our results suggest that C-1305 might specifically influence the expression of genes that are regulated by guanine-rich elements in the promoter regions.

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Disruption of PKCzeta elicits hypersensitivity to submicromolar amounts of etoposide independently of the non-homologous end-joining pathway

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Background: To investigate the mechanisms by which wortmannin, a phosphatidylinositol 3-kinase (PI3K) inhibitor known to inactivate ATM

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and DNA-PK and act as a radiosensitizer, potentiates the cytotoxicity of etoposide, a topoisomerase II poison.

Materials and methods: Cell lines competent or defective in nonhomologous end-joining (ATM, Ku86, DNA-PKcs) or in the zeta isoform of protein kinase C (PKCzeta), were exposed to graded concentrations of etoposide without or with pre-treatment with wortmannin. Cell survival, topoisomerase II decatenation activity, DNA double-strand break rejoining and phosphorylation of effectors downstream, on the one hand from ATM or ATR (Chk2, Chk1), on the other hand from PI3K (Akt/PKB, PKCzeta) were taken as an endpoint.

Results: Wortmannin stimulated the decatenating activity of topoisomerase II, promoted accumulation of DNA double-strand breaks and potentiated the lethal effect of etoposide through two pathways. Sensitization to high, micromolar amounts of etoposide required DNA-PK integrity. In contrast, wortmannin dramatically enhanced the susceptibility to low, nanomolar amounts of etoposide in a large fraction of the cell population irrespective of the status of ATM, Ku86 and DNA-PKcs, and shifted the specificity for cell killing by etoposide from S to G1 phase of the cell cycle. To determine whether PKCzeta was involved in this process, U937 cells bearing stable expression of a dominant-negative, kinase dead mutant of PKCzeta were exposed to submicromolar amounts of etoposide. PKCzetadefective cells actually reproduced the hypersensitivity pattern induced by wortmannin. In addition, transient hyperphosphorylation of PKCzeta was observed in PKCzeta-competent cells at 2 h interval from contact with etoposide and was abolished by wortmannin.

Conclusions: It is proposed that wortmannin acts through disruption of a phosphorylation cascade involving PI3K, type I phosphoinositidedependent protein kinase (PDK1) and PKCzeta in sequence, resulting in loss of topoisomerase II Ser phosphorylation. After Plo et al. (J Biol Chem 277: 31407-31415, 2002) it is suggested that potentiation of the cytotoxic response to submicromolar concentrations of etoposide induced by wortmannin or PKCzeta knockout, is due to increased activity of the beta isoform of topoisomerase II.

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AQ4N mediated potentiation of chemoradiotherapy in human lung tumour xenografts

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Background: AQ4N (1,4-bis[[2-(dimethylamino)ethyl] amino]-5,8-dihydroxyanthracene-9,10-dione bis-N-oxide) is a bioreductive topoisomerase II inhibitor that is currently in a Phase I clinical trial in combination with radiation. The purpose of this study was to provide data to support the use of AQ4N in chemo (cisplatin)-radiation protocols in carcinoma of the

Materials and Methods: Calu-6 xenografts (established from the ID implant of 2×10⁶ cells in 0.1ml of a 1:1 matrigel:serum free RPMI mix) were treated at a size of 240-280mm³. Radiotherapy was given as 2 Gy fractions (five days on, two days off) to maximum doses of 20 or 30 Gy. AQ4N (60mg/kg) was given weekly 30 minutes prior to the first radiation dose. Cisplatin (2mg/kg) was given once 6 hours after the first fraction. The growth delay for tumours to quadruple in size was taken as the experimental endpoint. To disclose the hypoxic fraction of Calu-6 xenografts, pimonidazole was administered at 60mg/kg. AQ4N metabolism was evaluated using HPLC. Results: Pimonidazole binding revealed that Calu-6 xenografts have a clinically relevant hypoxic fraction of 1-10%. AQ4N potentiated the response of Calu-6 xenografts to chemoradiotherapy in vivo. When combined with 10×2 Gy and cisplatin, AQ4N afforded an additional 7-day growth delay compared with cisplatin-radiotherapy alone (44 \pm 1 versus 37±4 days). This enhancement equated to that which would be achieved using an additional 4 fractions of radiation. In support of previous data AQ4N significantly enhanced the outcome of radiotherapy alone yielding a growth delay of 37 ± 2 days compared with 26 ± 5 days (p=0.05). Metabolism studies revealed that nitric oxide synthase (NOS), an enzyme that is commonly over-expressed in human tumours, can reduce AQ4N to form the 2e intermediate AQ4M whereas cytochrome p450s may have a preferential role in the conversion of AQ4M to the cytotoxic AQ4 moiety. Conclusions: These data support the future clinical evaluation of AQ4N in cisplatin based chemoradiotherapy protocols in carcinoma of the lung and indicate that tumour specific expression of NOS may facilitate reductive metabolism of this agent.

POSTER

Alterations of topoisomerase llalpha, associated with in vivo resistance to tafluposide, are partially reversible

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Farlier studies identified tafluposide as a novel dual inhibitor of topoisomerases I and II, with different mechanistic properties from most specific inhibitors of topoisomerases. Indeed, tafluposide appears to act by preventing the binding of topoisomerase I or II to DNA through a preferential interaction with the enzyme, but it is also capable of trapping topoisomerase II in an ATP-independent noncovalent salt-stable complex. Subsequent studies provided evidence that tafluposide is also a potent inhibitor of nucleotide excision repair. This compound has marked antitumor activity in a series of experimental tumor models and is now ongoing Phase I clinical trials. In the attempt to identify in vivo the targets involved in the antitumor activity of tafluposide, a P388 leukemia subline resistant to tafluposide was established in vivo. The results showed that resistance to tafluposide was mainly associated with alterations of topoisomerase $\mbox{II}\alpha$ and the endonuclease XPG, involved in NER, whilst only minor modifications of topoisomerases I and IIβ were recorded. P388/tafluposide resistant cells exhibited a marked reduction in topoisomerase $II\alpha$ protein level (87%), and a K155N mutation of this enzyme. Nucleotide excision repair activity was decreased, which was more specifically associated with a decreased level of XPG. To further study the implication of topoisomerase II α in tafluposide antitumor activity, the stability of the resistance to tafluposide was investigated. P388/tafluposide tumor cells were maintained in mice without treatment with tafluposide for 6 months. The resulting P388/tafluposide-6m cells did not exhibit further K155N mutation, whilst they still exhibited a reduction of the level of topoisomerase II, although it was less important (75%). These P388/tafluposide-6m cells partially recovered sensitivity to tafluposide treatment in vivo, as reflected by an optimal increase of lifespan of 100%, as compared to 0% for the P388/tafluposide resistant subline and 300% for the parental sensitive P388 cells. These data suggest that resistance to tafluposide is partially reversible and further support the implication of topoisomerase $\text{II}\alpha$ in tafluposide antitumor activity.

Tubulin-interacting agents

Preclinical evaluation of the second generation vascular disrupting agent OXI 4503

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Vascular disrupting agents (VDAs) for the treatment of cancer are designed to cause a rapid and selective shutdown of tumor vasculature, which leads to secondary ischemic tumor cell death. The lead drug combretastatin A4 disodium phosphate (CA4DP) are currently being examined in various clinical trials with encouraging results. Efforts are ongoing to develop new agents with improved activity and therapeutic windows. In the present studies, we studied the efficacy of a novel analog of combretastatin, OXI

The vascular and antitumor effects of OXI 4503 were assessed in the KHT murine sarcoma model. Tumor blood perfusion was estimated by Hoechst 33342 fluorescent labeling. Significant reduction in functional vessel was observed as early as * hr after a dose of 10 mg/kg or 25 mg/kg of OXI 4503. Histologic and morphometric assessments carried out using image analysis system on tumor sections showed the viable tissue remaining in these tumors 24 hr after treatment with a 25 mg/kg dose of OXI 4503 to be less than 6%. There was extensive necrosis induced within the tumor. This pattern extended to the very edge to the tumor, stopping at the surrounding soft tissue at many locations; while at other sites there remained a rim that was few cells thick. Tumor vascular status prior to and post treatment with OXI 4503 was also assess with non-invasive magnetic resonance imaging (MRI). The results of MRI GdDTPA inflow measurement revealed that OXI 4503 treatments significantly reduced perfusion in KHT sarcomas. The proportion of perfused tumor tissue was notably less after OXI 4503 treatment compared to CA4DP.

Administration of OXI 4503 to tumor bearing mice resulted in a dosedependent increase in tumor cell killing. OXI 4503 was more potent than CA4P on a per dose basis. For example, compared to CA4DP, 4-fold lower doses of OXI 4503 resulted in equivalent reduction in KHT sarcoma clonogenic cell survival. Administration of OXI 4503 to the animals also