



eTheRNA immunotherapies NV is currently developing a therapeutic vaccine for HPV16+ cancers. These cancers arise from a sexually transmitted virus called, human papilloma virus type 16 (HPV16).

Vaccine Overview

- **Project Name**
 - A002
- **Stage**
 - CTA/IND
- **Components**
 - mRNA encapsulated in lipid nanoparticles
 - TriMix adjuvant
 - Co-presented E6 and E7 HPV16 antigens
- **Indication**
 - Recurrent/metastatic HPV16+ cancer
- **Route of administration**
 - Intravenously

HPV Overview

High risk HPVs cause about 5% of all cancers worldwide. HPV-16+ can lead to head and neck, cervical and anogenital cancers. HPV-16 (& HPV18) cause almost all cervical cancers. HPV-16 is responsible for up to 70% of all head and neck cancers, depending on the geographic location. With 5-year survival rates of only 32% and 17%, improved treatment of unresectable head and neck and cervical cancer is an area of poorly met medical need.

Number of cases per year worldwide

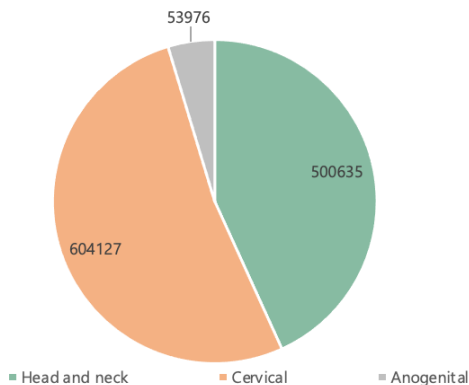
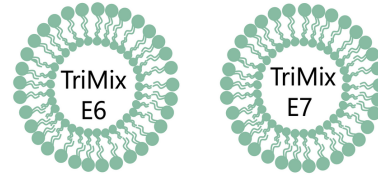


Figure 1: Cervical cancer has the most cases per year worldwide following head and neck cancer then anogenital cancer.

Vaccine Efficacy

Mixture of proprietary lipid nanoparticles loaded with mRNA coding for TriMix and either E6 or E7 HPV-16 antigen mRNA.



A002 is intended to treat unresectable HPV16+ cancer patients who receive anti-PD1 therapy. Preclinical experiments demonstrate that the best-in-class immune response (up to 80% of vaccine-specific CD8+ T-cells) elicited translates into potent anti-tumour activity. This effect is augmented when it is combined with anti-PD1 antibodies.

Tumour Growth

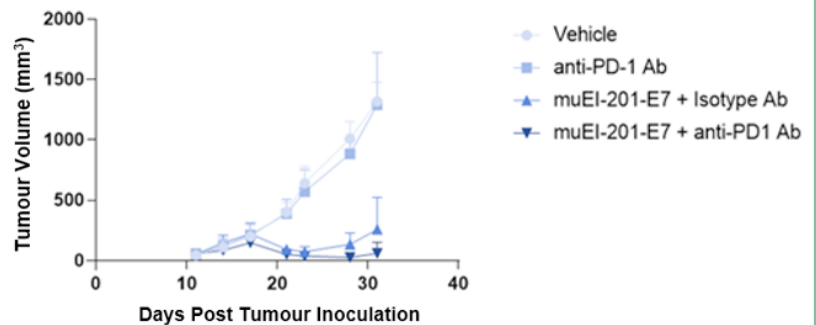


Figure 2: Data generated in TC-1 tumour bearing C57BL/6J mice. Vaccine (5µg) administered intravenously at days 11, 18 and 25 after tumour inoculation. Anti-PD-1 (200µg) or isotype control antibody (200µg) administered intraperitoneally every 3 to 4 days starting from day 14 until day 40. Average ± SEM is shown.

Next Steps

GLP-toxicity study in non-human primates demonstrated that A002 is well tolerated. The results of the GLP toxicity study support the **human clinical trial** application of the phase 1 study planned **to start in 2022**.