Combined Inhibition of Integrin β7 and TL1A, Integrin β7 and IL-23, or TL1A and IL-23 Are Superior to Their Constituent Monotherapies in Mouse TNBS-Induced Colitis

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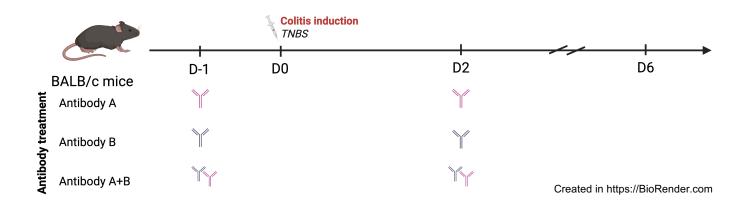
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Background

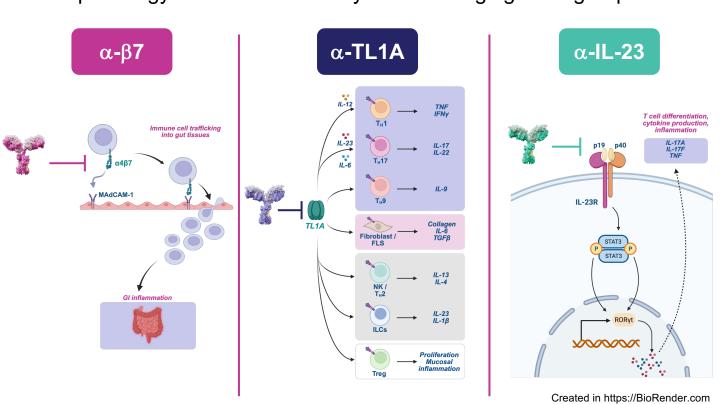
- Combined use of targeted biologic agents has the potential to break through the IBD treatment efficacy ceiling while avoiding the risks associated with broad immunosuppression.¹
- SPY001, SPY002, and SPY003 are investigational half-life extended antibodies against validated IBD targets (α4β7 integrin, TL1A, and IL-23, respectively)^{2,3,4} being evaluated as monotherapies and in combination to treat IBD in the SKYLINE-UC Phase 2 platform study in ulcerative colitis (UC; NCT07012395).

Methods

 Anti-mouse surrogates of SPY001, SPY002, and SPY003 were studied as monotherapies and as pairwise combinations in the TNBS murine colitis model

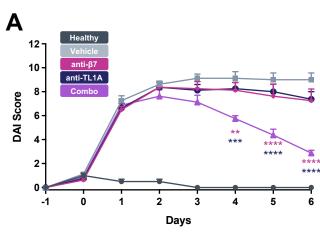


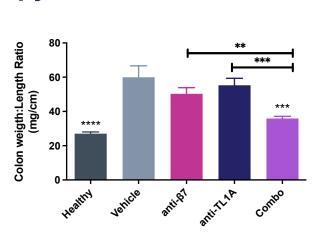
- BALB/c mice were dosed intravenously with test article (1 or 25 mg/kg) on Day -1 and Day 2, with Day 0 representing 2% TNBS administration.
- Histopathology was conducted only in the 25 mg/kg dose groups.

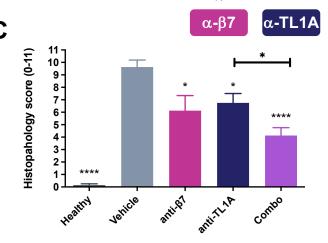


Results

Combining anti-β7 + anti-TL1A therapy results in superior efficacy compared to either monotherapy alone

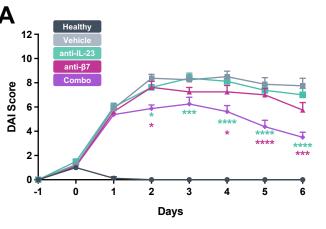


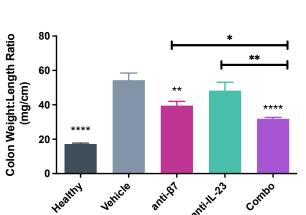


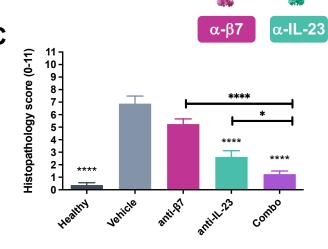


N=8 per group, all doses were 25 mg/kg of each agent; * P<0.05, ** P<0.01, *** P< 0.001, **** P< 0.0001; two-way ANOVA for combo vs. mono using Dunnett's correction for DAI, one-way ANOVA vs. vehicle control using Dunnett's correction for colon W:L ratio and histopathology; t-test for combo vs. mono.

Combining anti-β7 + anti-IL-23 therapy results in superior efficacy compared to either monotherapy alone

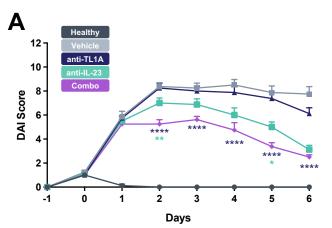


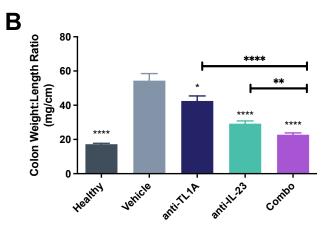


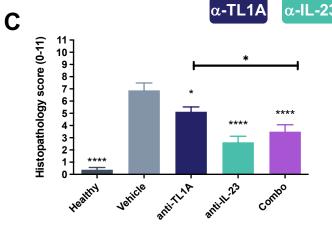


N=8 per group; Doses were 25 mg/kg (α - β 7) and 1 mg/kg (α -IL-23) in panels A and B; doses were 25 mg/kg for each agent in panel C; * P<0.05, ** P<0.01, *** P< 0.001, **** P< 0.0001; Two-way ANOVA for combo vs. mono using Dunnett's correction for DAI, One-way ANOVA vs. vehicle control using Dunnett's correction for colon W:L ratio and histopathology; t-test for combo vs. mono.

Combining anti-TL1A + anti-IL-23 therapy results in superior efficacy compared to either monotherapy alone







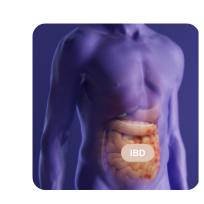
N=8 per group, all doses were 25 mg/kg of each agent; * P<0.05, ** P<0.01, *** P< 0.001, **** P< 0.0001; Two-way ANOVA for combo vs. mono using Dunnett's correction for DAI; one-way ANOVA vs. vehicle control using Dunnett's correction for colon W:L ratio and histopathology; t-test for combo vs. mono.

Conclusions

- Combination therapy with anti-β7 + anti-TL1A, anti-β7 + anti-IL-23 or anti-TL1A + anti-IL-23 resulted in additive to synergistic efficacy relative to constituent monotherapies as assessed by disease activity score in mouse TNBS-induced colitis.
- Combination effects were supported by additional endpoints including weight:length ratio and histopathology.
- These preclinical results support advancement of the combinations of SPY001, SPY002, and SPY003 into the SKYLINE-UC Phase 2 platform study in UC which started in mid-2025.



Phase 2 *platform* trial initiated to evaluate SPY001, SPY002, SPY003 and pairwise combinations in ulcerative colitis.





References

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- Zhu, E. *et al.* A Novel Monoclonal Antibody Drug Candidate SPY001 Targeting Integrin α4β7 for the Treatment of IBD: In Vitro Properties and Non-Human Primate Pharmacokinetics and Safety. *UEGW*, PP1103 (2024).
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