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A phase I/II trial of FOG-001, a first-in-class direct β -catenin:TCF4 inhibitor - Safety and preliminary antitumor activity in patients with desmoid tumors

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Background

Wnt pathway-activating mutations (WPAMs) are highly prevalent in desmoid tumors, almost all of which harbor a WPAM in APC or CTNNB1. FOG-001 is a HeliconTM peptide that competitively inhibits the interaction between β -catenin and TCF transcription factors. Given the causal nature of WPAM mutations in desmoid tumors, targeting β -catenin offers a more direct and disease-relevant approach than γ -secretase inhibitors, which inhibit Notch signaling. We describe a first-in-human, phase 1/2, multicenter study of FOG-001 in patients (pts) with WPAM+ solid tumors, including desmoid tumors, or microsatellite-stable colorectal cancer. This abstract reports data from pts with desmoid tumors.

Methods

Eligibility for desmoid pts: histologically confirmed desmoid tumor with WPAM; ≥1 prior systemic therapy or treatment naïve but deemed appropriate for participation. Primary objectives include safety/tolerability of FOG-001. Secondary objectives include anti-tumor activity.

Results

As of March 31, 2025, 5 desmoid tumor pts have received FOG-001 at doses ranging from 72–480 mg/m². Median age 27 years; 40% male. One pt with familial adenomatous polyposis had APC mutation, with CTNNB1 mutations in the other 4 pts; 3 pts had prior treatment with nirogacestat and progressed (n=2) or discontinued due to intolerability (n=1). FOG-001 demonstrated low PK variability and a dose-proportional increase in exposure. The most common (all-grade/grade \geq 3) treatment-related adverse events were alopecia (4/0; reversable), AST increase (3/1; reversable), epistaxis (3/0), fatigue (3/0), nausea (3/0), and hyperbilirubinemia (3/1; asymptomatic and reversable). Two of 4 efficacy-evaluable desmoid pts, including 1 pt progressing on nirogacestat, achieved a partial response (PR; 50%) with treatment duration of 33–77 weeks; the remaining 2 (50%) pts had stable disease (with 10.8% and 20.4% tumor reduction), for a disease-control rate of 100%.

Conclusions

Preliminary data show that FOG-001 has acceptable tolerability in pts with desmoid tumors. Tumor reductions were seen in all pts, including a PR in a pt who progressed on prior nirogacestat. Dose expansion in a desmoid-specific cohort is currently ongoing.

Clinical trial identification

NCT05919264.

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Legal entity responsible for the study

Parabilis Medicines.

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