

Non-Clinical Evidence Supporting the Upcoming CLD-201 Clinical Trial: Cell-Based Oncolytic Virotherapy for Multiple Solid Tumors

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Background

Oncolytic virotherapy is a promising approach that uses viruses to target and destroy cancer cells while activating an anti-tumor immune response. However, a major challenge is the rapid elimination of oncolytic viruses (OVs) by the patient's immune system. Calidi's innovative platform addresses this issue by combining allogeneic stem cells with an OV payload, preventing immune system elimination, and promoting viral amplification at tumor sites. This induces immunogenic cell death and stimulates potent anti-tumor immune responses, effectively targeting primary and metastatic tumors. Prior clinical studies have demonstrated the effectiveness of autologous stem cells loaded with Vaccinia virus CAL1 (ACAM2000) in multiple tumor types, especially when combined with checkpoint inhibitors. However, this approach is costly, lacks scalability and reproducibility. To overcome those limitations, we developed CLD-201 (or SuperNova-1), an innovative concept based on CAL1-loaded **allogeneic mesenchymal stem cells**, specifically designed for intratumoral administration. This study presents selected non-clinical studies performed to support the upcoming clinical trial to treat multiple solid tumors.

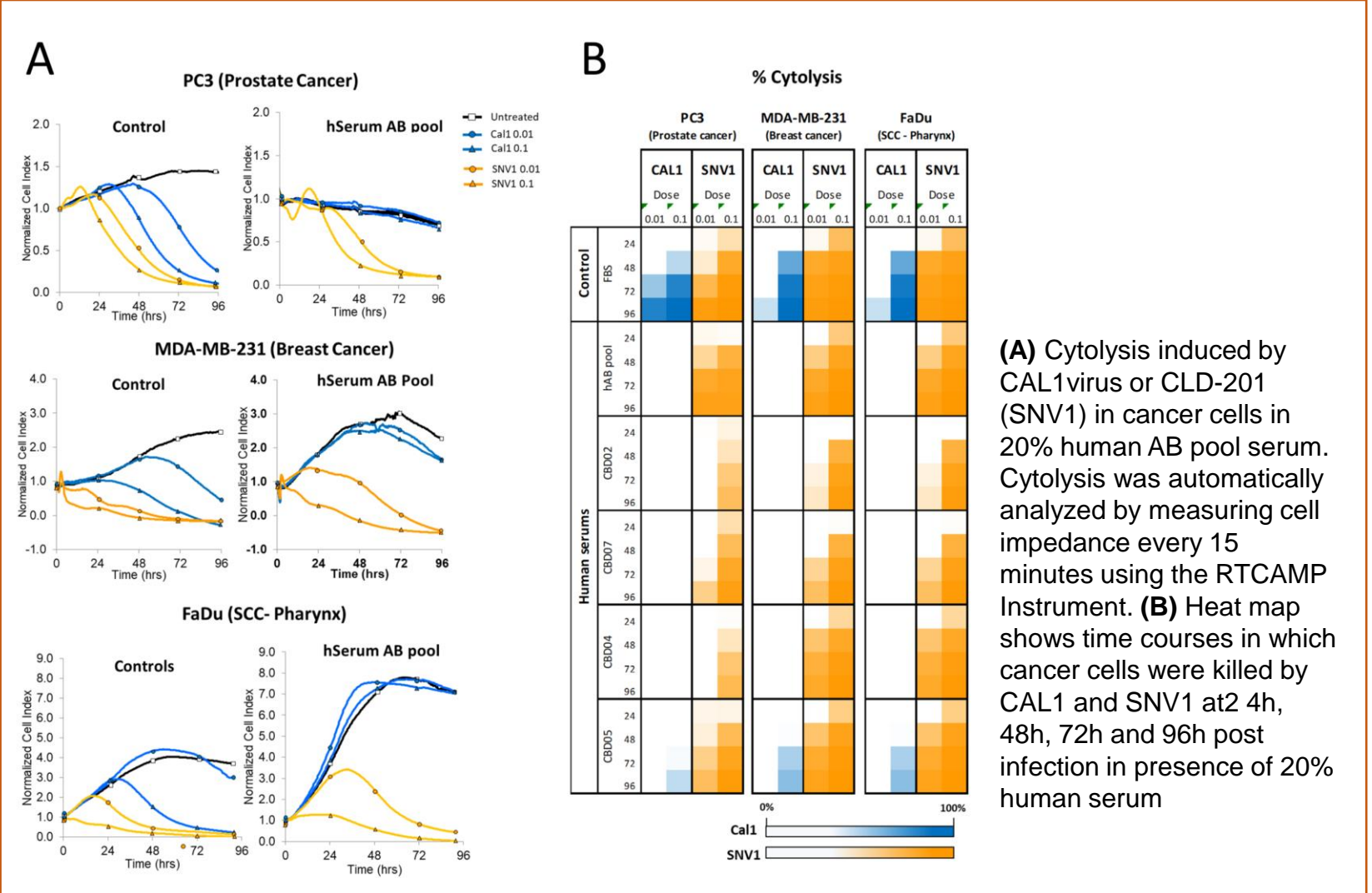
Conclusions

- Animals treated with the maximum tolerated dose (MTD) of 2e6 PFU/animal showed no signs of adverse toxicity and exhibited a reduction in tumor volume compared to the control group.
- No toxicity findings were associated with CLD-201 in the disease-free model. Additionally, virus detection in the lungs was cleared within two weeks following the last CLD-201 treatment.
- A Phase I non-randomized clinical trial is being planned to assess the safety and initial anti-tumor effects of CLD-201, administered intratumorally.

Graphic Abstract



CLD-201 Protects Vaccinia Virus Against Human Serum-Induced Inactivation



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Completed Clinical Safety Study: Autologous settings–Single dose

➤ **Stem cells (Autologous)** loaded with **CAL1 treatment was safe and well tolerated.**

➤ **Tumor regression** of patient with Head Neck tumor (squamous cell carcinoma)

Strong initial signals of efficacy documented (in combination with Checkpoint inhibitors)

Complete trial information: Minev BR et al. *J Transl Med.* 2019 Aug 19;17(1):271. doi: 10.1186/s12967-019-2011-3.

Clinical Study In Preparation of Allogeneic CLD-201, off-the shelf-multiple dose

- A Phase 1/2 study of intratumoral administration of allogeneic CLD-201 in patients with:
- Head & Neck Squamous Cell Carcinoma (HNSCC)
 - Triple Negative Breast Cancer (TNBC)
 - Advanced soft tissue Sarcoma

PART 1:
Dose Escalation in Five Indications

- Classical 3+3 trial design. Three dose levels will be tested.
- Three to 6 patients will be enrolled at each dose level depending on DLTs observed.

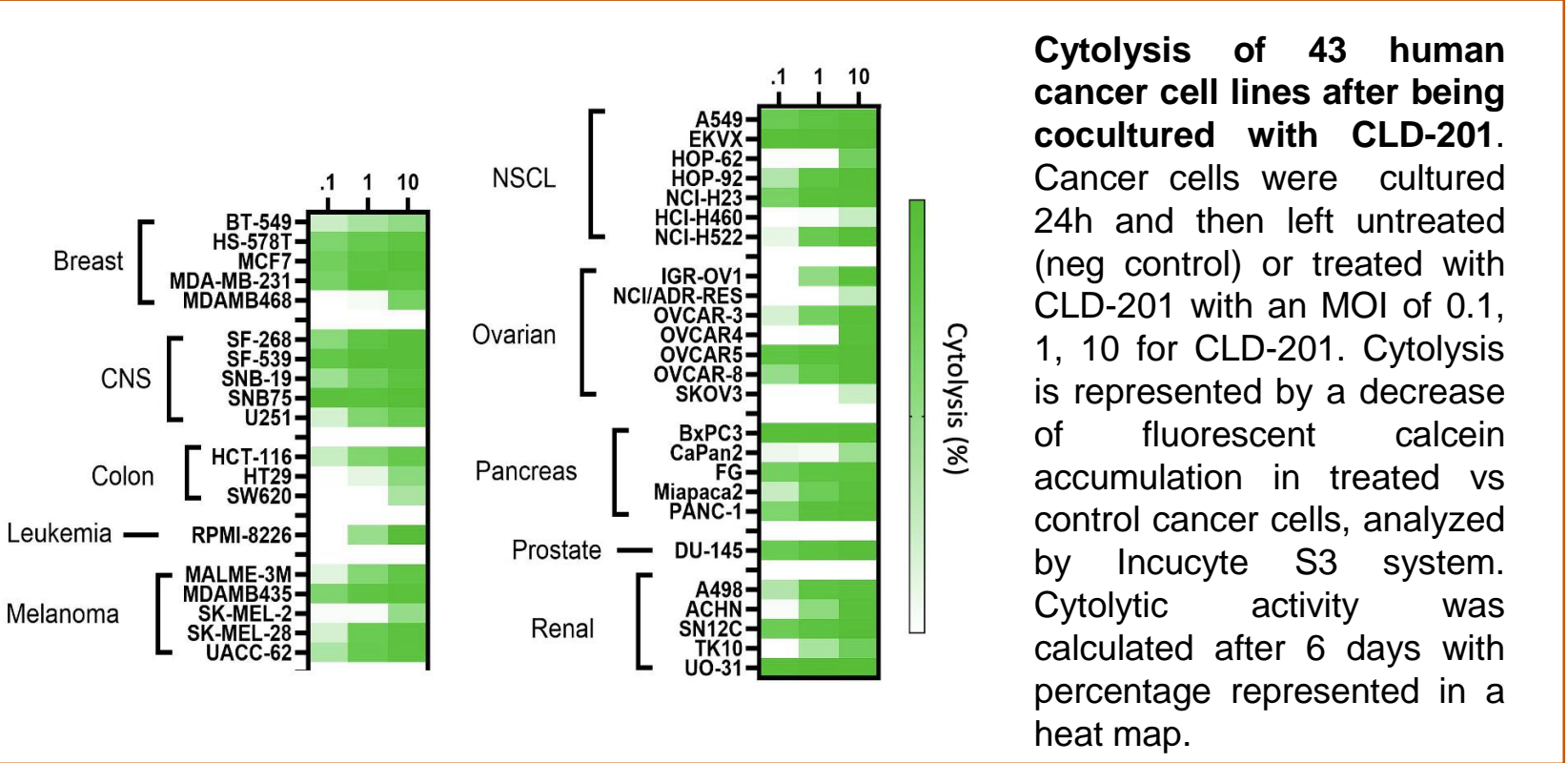
PART 2:
Expansion in Three Indications

- Ten patients from each of 3 separate indications will be selected from part 1 based on most favorable biological activity
- CLD-201 dose is identified in Part 1 of this trial.

PART 3:
Expansion in Best-Responding Indication – Phase 2

- 30 to 50 patients with the best responding indication determined in Part 2
- CLD-201 dose is identified in Part 1 of this trial.

CLD-201 Induces Potent Cytolysis Across Multiple Cancer Types (In Vitro)

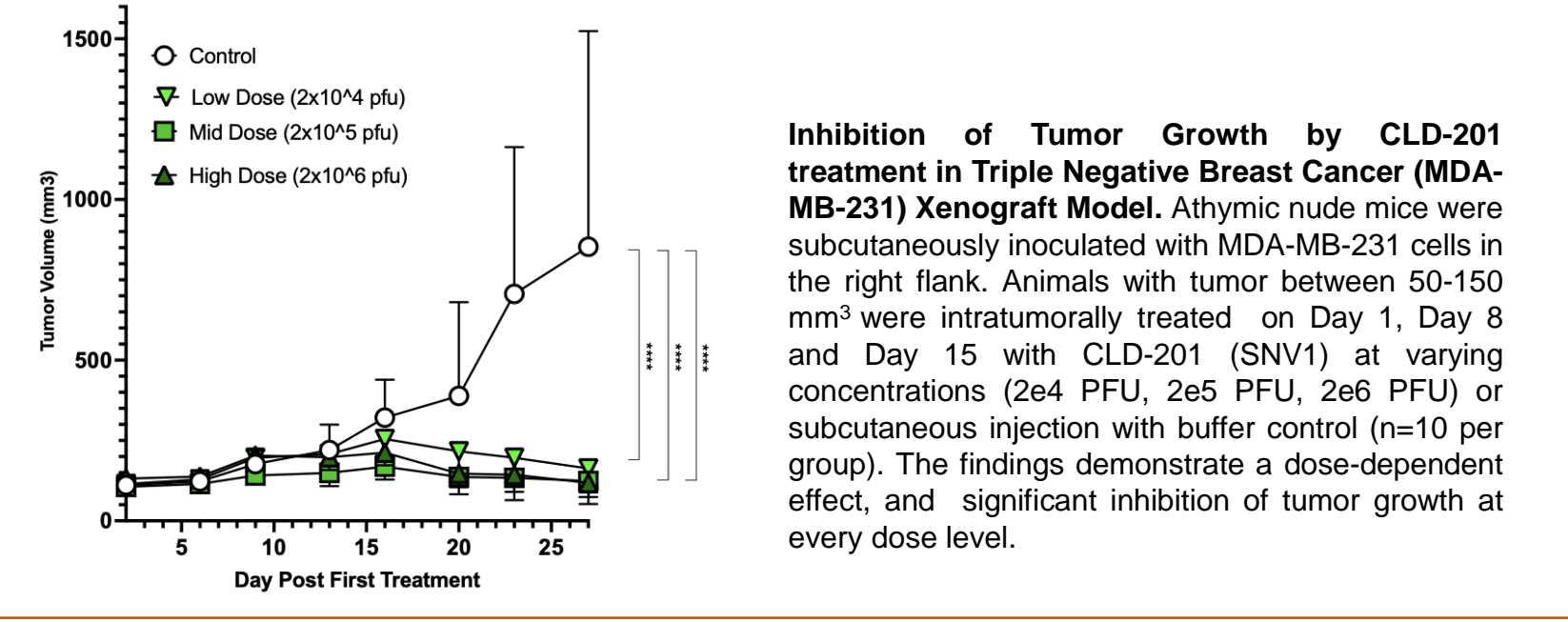


CLD-201 Induces Tumor Growth Inhibition in Multiple Cancer Types (In Vivo)

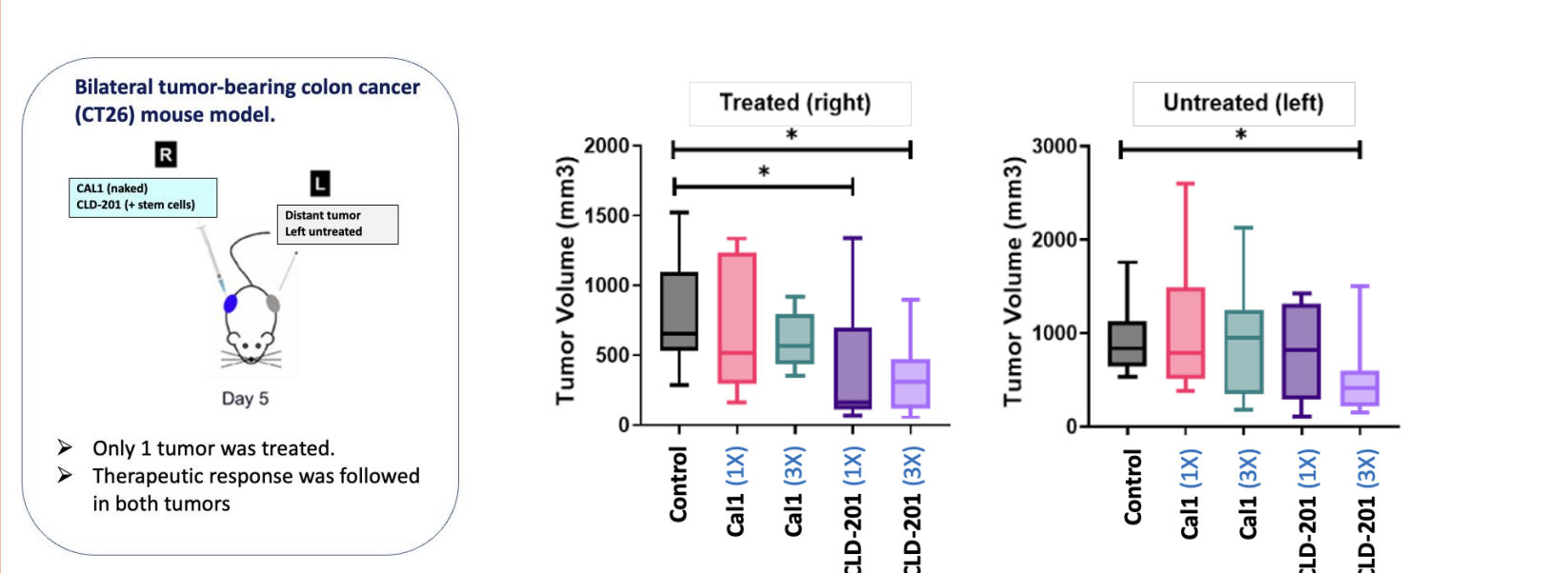
	Cell Line	Cancer Type	Growth Inhibition (%)	Model
Human	PC3	Prostate	59	Xenograft
	MDA-MB-231	Breast	98	Xenograft
	FaDu	Head & Neck SCC	68	Xenograft
	HT-1080	Sarcoma	95	Xenograft
	EMT-6	Breast	69	Syngeneic
Mouse	B16-F10	Melanoma	78	Syngeneic
	CT-26	Colon	77	Syngeneic
	Tramp-C2	Prostate	99	Syngeneic
	RM-1	Prostate	57	Syngeneic

All indicated tumor cell lines were subcutaneously implanted in mice (either with immunocompetent or immunocompromised immune system) to form tumor. When the tumor volume reached around 60-150 mm³, mice were treated intratumorally with 1e6 cells of CLD-201 (n=7-10). Tumor volume was measured 3 times per week. Mice were sacrificed if the tumors were bigger than 2000 mm³.

Therapeutic Efficacy of CLD-201 at different dose concentrations

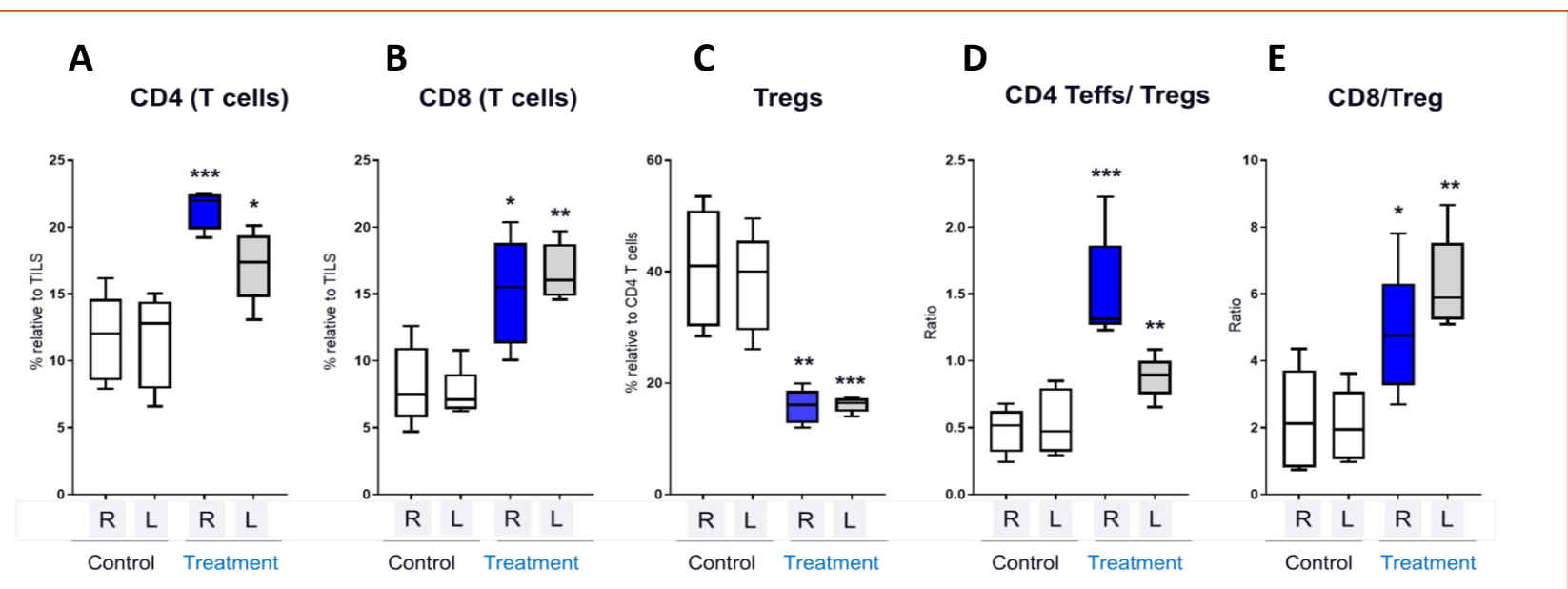


Three (3x) Intratumoral Administrations of CLD-201 Induces Strong and Durable Systemic Antitumor Immunity



SNV1 inhibits treated and distant untreated tumors. Female BALB/c mice were inoculated murine colon cancer cells (CT26) in the right and left abdominal flank regions. Once tumors reached the volume about 50 mm³, animals were treated with 1e6 SNV1 cells (10 PFU/cell) or with 1x10⁷ PFU of CAL1 vaccinia virus one or three times, every 2 days. Only right tumor was treated. Box plot data shows both right and left tumor size 12 days after treatment. Statistical significance was analyzed between treated groups compared to control group using nonparametric Mann-Whitney test, *P < 0.05

Local Administration of CLD-201 Induces Both Robust Local And Systemic Immune Cell Infiltration



Tumor infiltrating lymphocyte (TIL) analysis in treated and untreated tumors. Five days after the treatment, tumors from 5 controlled and 5 treated animals were excised and enzymatically digested to isolate TILs. The flow cytometry analysis demonstrated statistically significant treatment-related proportional increases in the fractions of total infiltrating CD4 (A) and CD8 (B) T cells and decreases in the CD4+CD25+Foxp3+ Tregs (C). The changes in the T cell compartment were further associated with improved ratios of CD25+Foxp3+ CD4+ Teff to Tregs (D) and CD8 T cells to Tregs (E). These changes in the TME are consistent with conditions favoring direct and indirect oncolysis through potentiation of adaptive anti-tumor immunity. Moreover, similar favorable changes in the fractions or ratios of immune infiltrates can be observed in both the treated (right) and distant untreated tumors (left), providing mechanistic basis for the observed potent abscopal effects.

References and Acknowledgement :

- Minev BR et al. First-in-human study of TK-positive oncolytic vaccinia virus delivered by adipose stromal vascular fraction cells. *J Transl Med.* 2019 Aug 19;17(1):271. doi: 10.1186/s12967-019-2011-3.
- Nguyen DH et al. Development of Allogeneic Stem Cell-Based Platform for Delivery and Potentiation of Oncolytic Virotherapy. *Cancers.* 2022 Dec 3;14 (24):6136. doi: 10.3390/cancers14246136.
- Hammad M. et al., – Deciphering Anticancer Mechanisms of Oncolytic Virus loaded stem cells2024 AACR
- Santidrian A.F., at al, SNV1, a novel oncolytic –cell-based platform for cancer therapy SITC 2023

Non-clinical studies: Disease free model - CLD-201 intravenous administered

ANIMAL MODEL: Disease free immunocompetent C57BL/6J mice

CLD-201 (SNV1) QW for 3 doses, Intravenous administration

Groups: Control
Low Dose (2e4 pfu)
Mid Dose (2e5 pfu)
High Dose (2e6 pfu)

Biodistribution and Shedding (CAL1 Virus)

➤ **After intravenous administration CAL1 virus detection in the lungs was cleared within two weeks after systemic administration.**

The biodistribution and shedding of the CAL1 virus were assessed by measuring the A56R viral gene copies by qPCR. Data, expressed as copies per µg of DNA. Samples were collected from blood, urine, and multiple tissue samples (see table) on Days 2, 16, and 45 after first CLD-201 administration. After systemic administration, data showed the virus was present mainly in the lungs on Day 2, with clearance after the final dose leading to complete elimination after a month. In Day 16 (1 day after last dose), viral DNA was additionally found in Spleen indicating clearance of the virus. No virus DNA was found in Day 45 indicating complete clearance of the virus in immunocompetent subjects.

Day	Dose PFU/mice	Subject ID	Lungs	Liver	Kidneys	Heart	Spleen	Eyes	Thymus	Spleen Node	Blood	Urine	Serum	Feces	Post-tissue
2	2e4 (low)	386	427	34							47	51			
		388	211												
		400	192												
		402	212	19											
		427	1020	63											
	2e5 (mid)	407	1045	52											
		429	1045	52											
		401	220	38											
		403	211	69											
		405	20												
16	2e4 (low)	402	30												
		431	71												
		432	202												
		433	232												
		434	303												
	2e5 (mid)	406	35												
		407	-												
		408	-												
		410	-												
		437	-												
45	2e4 (low)	430	-												
		431	-												
		432	-												
		433	-												
		434	-												
	2e5 (mid)	409	-												
		411	-												
		412	-												
		413	-												
		440	-												

Non-clinical studies: Human tumor bearing study –intratumoral administration

ANIMAL MODEL: Human Carcinoma Bearing Athymic Nude -Foxn1tm Mice

CLD-201 (SNV1) QW for 3 doses, Intratumoral administration

Groups: Control
Low Dose (2e4 pfu)
Mid Dose (2e5 pfu)
High Dose (2e6 pfu)

Biodistribution and Shedding (CAL1 Virus)

➤ **CAL1 virus amplifies and accumulates mainly in the tumor**

The biodistribution and shedding of the CAL1 virus were assessed by measuring the A56R viral gene copies by qPCR. Data, expressed as copies per µg of DNA. Samples were collected from blood, urine, faeces and tissue samples on Days 16, 22 and 29 after last CLD-201 administration. After intratumoral administration, data showed the virus was present mainly in the tumour and clearly replicates and accumulate within the tumour.

The absence of T cells can result in an impaired ability to clear viral infections

Day	Dose PFU/mice	Subject ID	Tumor	Liver	Lungs	Kidneys	Heart	Spleen	Brain	Spleen Node	Blood	Urine	Serum	Feces	Post-tissue
Day16	2e4 (low)	SNV03-01T	173,380,891												
		SNV03-02T	3,956,893												
		SNV03-03T	6,279,159	33										134	
		SNV03-04T	5,471,686											195	
		SNV03-05T	8,919												
	2e5 (medium)	SNV03-01T	1,500,513												
		SNV03-02T	4,744,975												
		SNV03-03T	1,469,393												
		SNV03-04T	2,479,589												
		SNV03-05T	2,302,550												
Day22	2e4 (low)	SNV03-01T	12,399,807	96										47	
		SNV03-02T	191,469												
		SNV03-03T	2,113,721	28											
		SNV03-04T	7,303,783												
		SNV03-05T	5,397,743												
	2e5 (medium)	SNV03-01T	1,305,154												
		SNV03-02T	2,344,194												
		SNV03-03T	12,393,125	21										87	381
		SNV03-04T	8,142,732	100	30									41	
		SNV03-05T	4,033,728												
Day29	2e4 (low)	SNV03-01T	10,943,886												
		SNV03-02T	3,312,441												
		SNV03-03T	1,469,393												
		SNV03-04T	8,947,350												
		SNV03-05T	10,943,886												
	2e5 (medium)	SNV03-01T	1,154,079												
		SNV03-02T	8,917,231												
		SNV03-03T	5,398,473												
		SNV03-04T	7,307,323												
		SNV03-05T	5,393,127												
Day29	2e4 (low)	SNV03-01T	2,267,171	48											
		SNV03-02T	14,983,825												
		SNV03-03T	7,940,490												
		SNV03-04T	5,398,473	35	451	11,188	43							33	4,097
		SNV03-05T	24,826,527												
	2e5 (medium)	SNV03-01T	12,158,973												
		SNV03-02T	10,472,403												
		SNV03-03T	24,826,527												
		SNV03-04T	24,879,728	26	1,923									107	774
		SNV03-05T	14,473,393	31										21	937

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