

Now enrolling patients with hematologic malignancies

**Do you have eligible patients who have exhausted
current standards of care?**

Prelude Therapeutics is currently recruiting patients with advanced hematologic malignancies and myeloproliferative disorders for our phase 1 clinical trials. Continue reading to find out more about our target platforms, drug candidates, clinical trial enrollment, and patient eligibility.



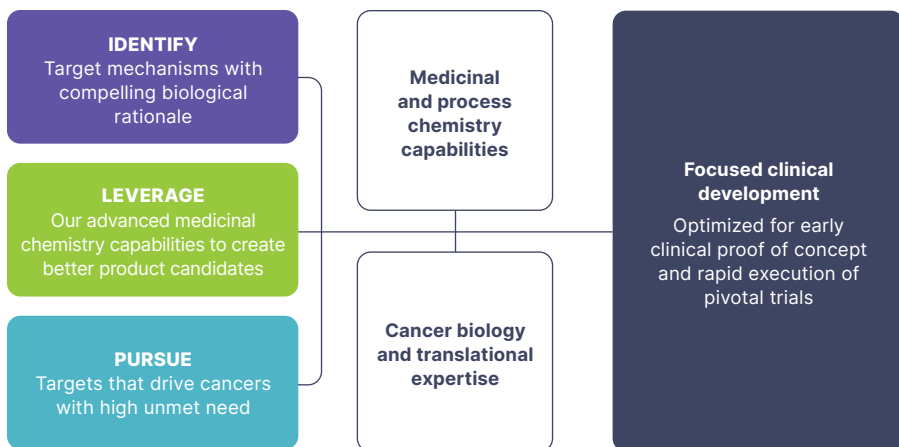
Prelude
THERAPEUTICS

Advancing innovation for patients with hematologic malignancies

Prelude Therapeutics is a clinical-stage precision oncology company focused on discovering and developing small molecule therapies that target key drivers of cancer cell growth, resistance, and survival. By developing therapies that target broad oncogenic mechanisms, Prelude Therapeutics strives to serve patients with high unmet medical needs, including those with hematologic malignancies.

We apply deep expertise in cancer biology and medicinal chemistry to identify targets in cancer signaling pathways amenable to small molecule-based therapies

Our discovery and developmental approach



Targeting key drivers in hematologic malignancies

Our current pipeline includes investigational agents that target PRMT5 and MCL1, both of which are important oncogenic drivers in multiple types of cancer.

PRMT5

- Protein arginine methyltransferase 5 (PRMT5) is an enzyme that catalyzes the formation of symmetric dimethylarginine residues on proteins that regulate biological processes that drive oncogenesis¹
- Overexpression and increased activity of PRMT5 are associated with poor outcomes and decreased survival in patients with solid tumors and hematologic malignancies, including certain leukemias and lymphomas, myelodysplastic syndrome (MDS), and myelofibrosis (MF)¹⁻³
- PRT543 is an investigational, oral, potent, and selective PRMT5 inhibitor currently in clinical development as a potential therapy for these malignancies*

MCL1

- Myeloid cell leukemia-1 (MCL1) is a member of the B-cell lymphoma 2 (BCL2) family of anti-apoptotic proteins and plays a key role in cancer cell survival⁴
- MCL1 is frequently overexpressed in many tumor types including hematologic malignancies and is often a driver of resistance to BCL2 inhibitors⁵
- PRT1419 is an investigational, potent, and selective MCL1 inhibitor that can be administered orally or by intravenous (IV) infusion. PRT1419 is currently in clinical development for patients with advanced solid tumors and relapsed/refractory hematological malignancies*

NCT03886831

Now recruiting eligible patients with hematologic malignancies who have exhausted current standards of care

A phase 1, multicenter, open-label, sequential-cohort, dose-escalation, dose-expansion study of PRT543, an oral, selective PRMT5 inhibitor, in patients with advanced solid tumors and hematologic malignancies⁶

The recommended expansion dose has
now been established^{7,8} 

Recruiting eligible patients with advanced solid tumors and the following hematologic malignancies:

Diffuse large B-cell lymphoma (DLBCL)

Mantle cell lymphoma (MCL)

Myelodysplastic syndrome (MDS)

Acute myeloid leukemia (AML)

Chronic myelomonocytic leukemia (CMML)

Myelofibrosis (MF)



Primary outcome measures ✓

- Dose-limiting toxicities
- Maximum tolerated dose/recommended dose for further study



Secondary outcome measures

- Safety
- Pharmacokinetics

Select key eligibility criteria*

- Advanced DLBCL
- Advanced MCL
- Relapsed MDS
- Relapsed AML or CMML
- Relapsed MF
- All malignancies must be refractory to established therapies
- Eastern Cooperative Oncology Group (ECOG) Performance Score of 0 or 1
- Adequate organ function (bone marrow, hepatic, renal, cardiovascular)
- No primary central nervous system (CNS) malignancies or uncontrolled CNS metastases
- No requirement of pharmacologic doses of glucocorticoids
- No prior treatment with chimeric antigen receptor T (CAR-T) cells
- No prior allogeneic bone marrow transplant or autologous hematopoietic transplantation less than 100 days since transplantation

*Visit clinicaltrials.gov for full criteria details.

To see if your patients qualify and for additional study details, visit clinicaltrials.gov or contact us directly at PreludeClinOps@preludetx.com

NCT04543305

Now recruiting eligible patients with relapsed/ refractory hematologic malignancies

A phase 1, multicenter, open-label, dose-escalation study of PRT1419, an oral, selective MCL1 inhibitor, in patients with relapsed/refractory hematologic malignancies⁹

Recruiting eligible patients with:

Acute myeloid leukemia (AML)

Chronic myelomonocytic leukemia (CMML)

Myelodysplastic syndrome (MDS)

**Myelodysplastic syndrome/myeloproliferative neoplasm
(MDS/MPN) overlap syndrome**

Non-Hodgkin lymphoma (NHL)

Multiple myeloma (MM)



Primary outcome measures

- Dose-limiting toxicities
- Maximum tolerated dose/recommended dose for further study



Secondary outcome measures

- Safety
- Pharmacokinetics
- Objective response

Select key eligibility criteria*

- Pathologically confirmed AML ≥ 200 mg/24 hours, serum free light chain (sFLC) >10 mg/dL with normal sFLC ratio, with presence of soft tissue plasmacytoma confirmed by imaging
- Intermediate-2 or high risk CMML per CMML-specific prognostic scoring system (CPSS) or clinical/molecular (CPSS-mol) criteria
- NHL and MM patients must have absolute neutrophil count (ANC) $\geq 1.0 \times 10^3 \mu\text{L}$ and platelet count $\geq 50,000 \mu\text{L}$ within 14 days prior to Day 1 of study
- Intermediate, high, or very high risk MDS per International Prognostic Scoring System-Revised (IPSS-R) criteria that is relapsed or refractory to approved therapies
- Eastern Cooperative Oncology Group (ECOG) performance status ≤ 2
- MDS/MPN overlap syndrome displaying fibrosis and dysplastic features
- Adequate organ function (bone marrow, hepatic, renal, cardiovascular)
- Histologically or cytologically confirmed NHL, with one measurable lesion
- Left ventricular ejection fraction $\geq 50\%$
- MM defined as ≥ 1 of the following: serum M-protein ≥ 0.5 g/dL, urine M-protein ≥ 200 mg/24 hours, serum free light chain (sFLC) >10 mg/dL with normal sFLC ratio, with presence of soft tissue plasmacytoma confirmed by imaging
- No prior exposure to an MCL1 inhibitor

*Visit clinicaltrials.gov for full criteria details.

To see if your patients qualify and for additional study details, visit clinicaltrials.gov or contact us directly at PreludeClinOps@preludetx.com

NCT05107856

Now recruiting eligible patients with relapsed/ refractory hematologic malignancies

A phase 1, multicenter, open-label, dose-escalation study of PRT1419, a selective MCL1 inhibitor, administered via intravenous (IV) infusion in patients with relapsed/refractory hematologic malignancies¹⁰

Recruiting eligible patients with:

Acute myeloid leukemia (AML)

Chronic myelomonocytic leukemia (CMML)

Myelodysplastic syndrome (MDS)

**Myelodysplastic syndrome/myeloproliferative neoplasm
(MDS/MPN) overlap syndrome**



Primary outcome measures

- Dose-limiting toxicities
- Minimum safe and biologically effective dose/recommended dose for further study



Secondary outcome measures

- Safety
- Pharmacokinetics
- Objective response

Select key eligibility criteria*

- Pathologically confirmed AML
- Eastern Cooperative Oncology Group (ECOG) performance status ≤ 2
- Intermediate-2 or high risk CMML per CMML-specific prognostic scoring system (CPSS) or clinical/molecular (CPSS-mol) criteria
- Adequate organ function (bone marrow, hepatic, renal, cardiovascular)
- Intermediate, high, or very high risk MDS per International Prognostic Scoring System-Revised (IPSS-R) criteria that is relapsed or refractory to approved therapies
- Left ventricular ejection fraction $\geq 50\%$
- MDS/MPN overlap syndrome displaying fibrosis and dysplastic features
- No prior exposure to an MCL1 inhibitor

*Visit clinicaltrials.gov for full criteria details.

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Partner with us

in our commitment to advancing novel treatments for patients with hematologic malignancies

At Prelude Therapeutics, we focus on advancing novel therapeutics through clinical trials for patients with cancers that have high unmet needs.

Clinical studies of our investigational PRMT5 inhibitor, PRT543 ([NCT03886831](#)), and MCL1 inhibitor, PRT1419 ([NCT04543305](#), [NCT05107856](#)), are currently enrolling.

If you want more information on clinical trial opportunities for your patients with hematologic malignancies, visit [clinicaltrials.gov](#) using the links below for each investigational therapy, or contact us directly at PreludeClinOps@preludetx.com.



Visit [NCT03886831](#) for more information about our **PRT543** clinical trial.

Visit [NCT04543305](#) and [NCT05107856](#) for more information about our **PRT1419** clinical trials.

References: **1.** Xiao W, Chen X, Liu L, Shu Y, Zhang M, Zhong Y. Role of protein arginine methyltransferase 5 in human cancers. *Biomed Pharmacother.* 2019;114:108790. doi:10.1016/j.biopha.2019.108790. **2.** Shailesh H, Zakaria ZZ, Baiocchi R, Sif S. Protein arginine methyltransferase 5 (PRMT5) dysregulation in cancer. *Oncotarget.* 2018;9(94):36705-36718. doi:10.18632/oncotarget.26404. **3.** Pastore F, Bhagwat N, Pastore A, et al. PRMT5 inhibition modulates E2F1 methylation and gene-regulatory networks leading to therapeutic efficacy in JAK2 V617F-mutant MPN. *Cancer Discov.* 2020;10(11):1742-1757. doi:10.1158/2159-8290.CD-20-0026. **4.** Xiang W, Yang CY, Bai L. MCL-1 inhibition in cancer treatment. *Onco Targets Ther.* 2018;11:7301-7314. Published 2018 Oct 23. doi:10.2147/OTT.S146228. **5.** Hird AW, Tron AE. Recent advances in the development of Mcl-1 inhibitors for cancer therapy. *Pharmacol Ther.* 2019;198:59-67. doi:10.1016/j.pharmthera.2019.02.007. **6.** A study of PRT543 in participants with advanced solid tumors and hematologic malignancies. ClinicalTrials.gov identifier: NCT03886831. Updated July 30, 2021. Accessed October 17, 2021. <https://clinicaltrials.gov/ct2/show/NCT03886831>. **7.** Patel MR, Monga V, Jauhari S, et al. A phase 1 dose escalation study of protein arginine methyltransferase 5 (PRMT5) inhibitor PRT543 in patients with myeloid malignancies. Poster presented at: The 63rd ASH Annual Meeting and Exposition; December 11-14, 2021; Atlanta, GA. **8.** McKean M, Patel MR, Wesolowski R, et al. A phase 1 dose-escalation study of protein arginine methyltransferase 5 (PRMT5) inhibitor PRT543 in patients with advanced solid tumors and lymphoma. Poster presented at: The AACR-NCI-EORTC Virtual International Conference on Molecular Targets and Cancer; October 7-10, 2021. **9.** A study of PRT1419 in patients with relapsed/refractory hematologic malignancies. ClinicalTrials.gov identifier: NCT04543305. Updated April 5, 2021. Accessed October 17, 2021. <https://clinicaltrials.gov/ct2/show/NCT04543305>. **10.** A study of PRT1419 injection in patients with relapsed/refractory hematologic malignancies. ClinicalTrials.gov identifier: NCT05107856. Updated November 4, 2021. Accessed November 5, 2021. <https://clinicaltrials.gov/ct2/show/NCT05107856>.