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## **ASCENTAGE PHARMA GROUP INTERNATIONAL**

**亞盛醫藥集團**

*(Incorporated in the Cayman Islands with limited liability)*

**(Stock Code: 6855)**

### **Voluntary Announcement**

#### **Latest Clinical Data of Apoptosis Targeting Drug Candidates was Presented at 2020 American Society of Clinical Oncology (ASCO) Annual Meeting**

Ascentage Pharma Group International (the “**Company**” or “**Ascentage Pharma**”) is pleased to announce that the Company presented four posters of the latest clinical data of apoptosis targeting drug candidates including the MDM2-p53 inhibitor APG-115, novel Bcl-2/Bcl-xL dual inhibitor palcitoclax or APG-1252, and IAP inhibitor APG-1387, at the 2020 American Society of Clinical Oncology (ASCO) annual meeting (the “**ASCO Annual Meeting**”). The ASCO Annual Meeting was held online for the first time, taking place from May 29 to May 31, 2020 (Eastern Time). The abstracts are as follows:

**Title:** **Phase Ib study of a novel, small-molecule MDM2 inhibitor APG-115 combined with pembrolizumab in US patients with metastatic solid tumors**

**Abstract:** #3512

**Study data:**

- As of April 1, 2020, in the Phase Ib study, 19 patients were treated with APG-115 in 4 alternate-day (QOD) does cohorts (50 mg, 100 mg, 150 mg, and 200 mg) in combination with pembrolizumab. No dose-limiting toxicities (DLTs) were observed. The maximum tolerated dose (MTD) was not reached.

- APG-115 in combination with pembrolizumab was generally tolerated. Common treatment-related adverse events (TRAEs) ( $\geq 10\%$ ) included nausea, vomiting, fatigue, decreased platelet and neutrophil counts, decreased appetite, diarrhea, and hypothyroidism.
- Antitumor effects were observed among 18 efficacy evaluable patients, including 1 patient with a confirmed complete response (CR) lasting for 20 months (still ongoing). Two patients had confirmed partial response (PR) for 8 to 9 months: of these, one patient with NSCLC failed 3 months' nivolumab therapy and the other had immunotherapy-naïve appendix cancer; seven patients had stable disease (SD) for 1.5 to 7 months. The objective response rate was 16.7%, and the disease control rate (DCR) was 55.5%.

**Title:** **Phase Ib study of a novel bivalent IAP antagonist APG-1387 in combination of pembrolizumab for patients with advanced solid tumors**

**Abstract:** #3508

- Study data:**
- An open-label, two-part, Phase I (APG-1387 monotherapy) and Phase Ib (APG-1387 in combination with pembrolizumab) study in the US.
  - Through April 1, 2020, in the Phase Ib study, 41 patients with various advanced solid tumors had been treated with APG-1387 in combination with pembrolizumab, including 10 patients in dose escalation: 20 mg (n=4), 30 mg (n=3), and 45 mg (n=3); and 31 patients in MTD does expansion. No DLT was observed during does escalation, and the MTD of APG-1387 was determined as 45 mg.
  - APG-1387 was generally well tolerated, with manageable adverse events when used in combination with pembrolizumab. Common TRAEs ( $\geq 10\%$ ) included fatigue, headache, nausea, and maculopapular rash. Facial nerve disorder was seen in 2 patients (4.9%), which was not higher than in the single-agent study.
  - Antitumor effects among 37 efficacy evaluable patients, 4 patients had PR: 2 NSCLC, 1 CRC, and 1 breast cancer) and 12 patients had SD. The NSCLC cohort achieved 50% ORR and 100% DCR. The CRC cohort achieved 50% DCR with 1 PR and 3 durable SD.

**Title:** **First-in-human study of palcitoclax (APG-1252), a novel dual Bcl-2/Bcl-xL inhibitor, demonstrated advantages in platelet safety while maintaining anticancer effect in U.S. patients with metastatic solid tumors**

**Abstract:** #3509

- Study data:**
- As of December 21, 2019, 42 patients (31 on IV twice per week (BIW) and 11 on once per week (QW)) with metastatic solid tumors had received APG-1252 treatment ranging from 10 to 400 mg in a 28-day cycle. Dose escalation finished.
  - Four DLTs (grade 4(G4) thrombocytopenia) were observed at 400 mg and 320 mg. The most common  $\geq$ G3 AE was thrombocytopenia, an on-target toxicity shown to be transient, resolving rapidly within 2 to 6 days.
  - Of 36 efficacy-evaluable patients, 3 patients with PR had relapsed SCLC, poorly differentiated neuroendocrine tumor of the prostate, or high-grade serous ovarian cancer. The patient with SCLC had PR that lasted for  $>$ 18 cycles (dose level: 40 mg BIW). A total of 7 patients achieved SD, including 2 patients with SD lasting  $\geq$  6 cycles and 3 lasting  $\geq$ 4 cycles. Another 26 patients had progressive disease (PD) at their first tumor assessment. The overall DCR was 27.77 %.
  - Most TRAEs were G1 or G2, and 26.2% patients had  $\geq$  G3 TRAEs. The most common TRAE was decreased platelet count (14.3%), followed by increases in aspartate aminotransferase (9.5%) and alanine aminotransferase (7.1%).
  - APG-1252 was well tolerated at doses up to 240 mg. The MTD/ RP2D was determined as 240 mg QW. The MTD expansion cohort had finished the patient enrollment.

**Title:** Phase I study results of APG-115, a MDM2-p53 antagonist, in Chinese patients with advanced liposarcoma and other solid tumors

**Abstract:** #11542

**Study data:**

- As of January 9, 2020, 21 eligible patients with advanced solid tumors were treated with APG-115 at 3 dose levels: 100 mg, 150 mg, and 200 mg. Liposarcoma comprised two-thirds of all tumors. Most of the 21 patients had completed  $\geq 2$  cycles of APG-115 treatment, and 1 patient had completed 6 cycles.
- Efficacy assessment was performed in 19 patients (4 patients were still on treatment), including 13 with liposarcoma. Among these patients, 1 had a PR, and 12 had SD. The objective response rate was 5.3%, and the DCR was 68.4%. In patients with LPS and wild-type TP53 (n=9), the objective response rate was higher, reaching 11.1%, with a DCR of 77.8%.
- Common treatment-emergent adverse events (TEAEs) included anemia and decreases in leukocyte and platelet counts. However, most TRAEs were G1 or G2, and their TEAE incidences were much lower at the 100-mg dose level.
- This study found that, using a 21 day-on/7 day-off dosing schedule, APG-115 was generally safe and well tolerated especially at the 100-mg dose level. The RP2D was determined as 100 mg QOD.
- Evidence of single-agent clinical efficacy of APG-115 was observed in patients with LPS, as well as in patients with expression of wild-type TP53. Updated results of this study continue to support our previous interpretation that wild-type TP53 is a predictive biomarker of response to APG-115 in patients with LPS and other cancers.

**Cautionary Statement required by Rule 18A.05 of the Rules Governing the Listing of Securities on The Stock Exchange of Hong Kong Limited:** We cannot guarantee that we will be able to obtain further approval for, or ultimately market, APG-115, APG-1387 and APG-1252 successfully.

By order of the Board  
**Ascentage Pharma Group International**  
**Dr. Yang Dajun**  
*Chairman and Executive Director of the Company*

Suzhou, People's Republic of China, May 31, 2020

*As at the date of this announcement, the board of directors of the Company comprises Dr. Yang Dajun as Chairman and executive director, Dr. Wang Shaomeng, Dr. Tian Yuan, Mr. Zhao Qun, Dr. Lu Simon Dazhong and Mr. Liu Qian as non-executive directors, and Mr. Ye Changqing, Dr. Yin Zheng and Mr. Ren Wei as independent non-executive directors.*