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<p>(21) International Application Number: PCT/US97/12158 (22) International Filing Date: 14 July 1997 (14.07.97) (30) Priority Data: 60/022,863 24 July 1996 (24.07.96) US (71) Applicant: BRISTOL-MYERS SQUIBB COMPANY [US/US]; P.O. Box 4000, Princeton, NJ 08543-4000 (US). (72) Inventor: FIRESTONE, Raymond, A.; 59 Barnes Road, Stamford, CT 06902 (US). (74) Agents: RODNEY, Burton et al.; Bristol-Myers Squibb Com- pany, P.O. Box 4000, Princeton, NJ 08543-4000 (US).</p>	<p>(81) Designated States: AL, AM, AT, AU, AZ, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, EE, ES, FI, GB, GE, HU, IL, IS, JP, KE, KG, KP, KR, KZ, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, TJ, TM, TR, TT, UA, UG, UZ, VN, ARIPO patent (GH, KE, LS, MW, SD, SZ, UG, ZW), Eurasian patent (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European patent (AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE), OAPI patent (BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG).</p> <p><b>Published</b> <i>With international search report.</i></p>	

(54) Title: METHOD FOR TREATING TUMORS HAVING HIGH LDL REQUIREMENTS EMPLOYING MTP INHIBITORS

(57) Abstract

A method is provided for treating hematologic tumors and solid tumors, including certain types of leukemias and metastatic tumors, having high LDL requirements employing a delipidating agent such as an MTP inhibitor to substantially reduce LDL blood levels. In addition, a method is provided for treating tumors of the above types having high LDL requirements, especially hematologic tumors such as certain leukemias, employing a delipidating compound to substantially remove native LDL, and then administering a cytotoxic agent carried in reconstituted LDL.

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METHOD FOR TREATING TUMORS HAVING  
HIGH LDL REQUIREMENTS EMPLOYING MTP INHIBITORS

Field of the Invention

5           The present invention relates to a method  
for treating cancers having high LDL requirements  
employing a delipidating agent, which preferably is  
an MTP inhibitor, alone or in combination with a  
cytotoxic agent.

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Background of the Invention

          It is known that cancer cells need  
cholesterol to make new cell membrane. The  
cholesterol is supplied by either de novo synthesis  
15 or from low-density lipoprotein (LDL), or both,  
Firestone, R.A. et al, "Selective Delivery of  
Cytotoxic Compounds to Cells by the LDL Pathway, J.  
Med. Chem., 1984, 27, 1037-1043. Firestone et al  
describe a series of cytotoxic compounds that are  
20 compatible with reconstituted LDL and may be  
delivered with reconstituted LDL against cancers  
that copiously internalize LDL.

          Firestone, R.A., "Low-Density Lipoprotein  
as a Vehicle for Targeting Antitumor Compounds to  
25 Cancer Cells", Bioconjugate Chemistry, 1994, 5, pp  
105-113, at page 105, in the "Introduction",  
discusses problems associated with cancer treatment  
as follows:

          "It is difficult to eradicate cancer cells  
30 in vivo because they share with normal cells, for  
the most part, the same biochemical machinery.  
There is no cytotoxic substance that is completely  
selective for malignant cells, and all those  
presently in use cause dose-limiting toxic side  
35 effects. For this reason there is a growing  
emphasis on targeting, i.e., selective delivery of

drugs to tumors in ways that bypass normal body tissues.

"Among the vehicles that can be used for this purpose is low-density lipoprotein (LDL), a normal blood constituent that is the body's principal means for delivery of cholesterol to tissues. Cholesterol, a major constituent of mammalian cell membranes, is obtained by cells either by making it themselves or by picking it up from LDL or both. Cancer cells, like all dividing ones, need large amounts of cholesterol because they are making new membrane. There is ample evidence that many types of cancer cells indeed have unusually great LDL requirements. The evidence is 2-fold: measurements of LDL uptake by tumor cells and depletion of LDL in the blood of cancer patients resulting from high uptake by the tumor (*vide infra*). Thus, if LDL could be made to carry antitumor drugs, it would serve as a targeting vehicle. This concept was proposed in 1981-2 (1,2) and has been reviewed several times since then (3-7)."

(1) Gal, D., Ohashi, J., MacDonald, P.C., Buchsbaum, H.J., and Simpson, E.R. (1981) Low-density lipoprotein as a potential vehicle for chemotherapeutic agents and radionucleotides in the management of gynecologic neoplasms. *Am. J. Obstet. Gynecol.* 139, 877.

(2) Counsell, R.E., and Pohland, R.C. (1982) Lipoproteins as potential site-specific delivery systems for diagnostic and therapeutic agents. *J. Med. Chem.* 25, 1115.

(3) van Berkel, T.J.C. (1993) Drug targeting: application of endogenous carriers for site-specific delivery of drugs. *J. Controlled Release* 24, 145.

(4) Vitols, S. (1991) Uptake of low-density lipoprotein by malignant cell--possible therapeutic applications. *Cancer Cells* 3, 488.

(5) deSmidt, P.C., and Van Berkel, T.J.C. (1990) LDL-mediated drug targeting. *Crit. Revs. Thera. Drug Carrier Syst.* 7, 99.

(6) Peterson, C., Masquelier, M., Rudling, M., Söderberg, K., and Vitols, S. (1991) Lipoproteins, malignancy and anticancer agents. *Targeted Diagn. Ther. (U.S.)* 5, 175.

(7) Catapano, A.L. (1987) Transport of cytotoxic compounds to cells via the LDL receptor pathway. *Med. Sci. Res.* 15, 411.

At page 105 under the topic "LDL Uptake...", Firestone, supra, lists numerous tumor types that have especially high LDL requirements including acute myeloid leukemia (AML), human monocytic (FAB-M5) and myelomonocytic (FAB-M4) leukemias, chronic myeloid leukemia in blast crisis, solid tumors such as epidermoid cervical cancer EC-50, endometrial adenocarcinoma AC-258, gastric carcinoma and parotid adenoma, G2 heptoma, squamous lung cancer, choriocarcinoma, brain tumors such as medulloblastoma, oligodendroglioma, glioma V-251MG, and malignant meningioma, as well as tumor cells that are exceptionally metastatic

(Schroeder, F., Kier, A.B. Olson, C.D., and Dempsey, N.E. (1984) Correlation of tumore metastasis with sterol carrier protein and plasma membrane sterol levels. *Biochem. Biophys. Res. Commun.* 124, 283, and

Cambien, F., Ducimetiere, P., and Richard, J. (1980) Total serum cholesterol and cancer mortality in a middle-aged male population. *Am. J. Epidemiol.* 112, 388),

tumor cells that are exceptionally aggressive (Rudling, M.J., Stahle, L., Peterson,

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