Phase 1 Study Design
The study was a Phase 1/2a, open-label, multi-center study (NCT01919221) evaluated the safety and tolerability of 23ME-00610 and determined its recommended phase 2 dose (RP2D) for the treatment of patients with locally advanced (unresectable) or metastatic solid malignancies.

Dose Escalation Study Design (n=28-29)
- A 3+3 design was used to identify the maximum tolerable dose and estimate the dose-limiting toxicity (DLT).
- Patients were enrolled sequentially at each dose level.
- The DLT observation period was 21 days following the first dose.
- Treatment-related AEs were monitored throughout the study.

Treatment Exposure and Adverse Event Summary
- No dose-limiting toxicities or serious AEs related to 23ME-00610 were observed.
- One patient experienced a treatment-related, treatment-emergent adverse event (TEAE) leading to discontinuation of 23ME-00610.
- No non-serious grade 3-4 AEs were reported during the study.

Immune-Related Adverse Events
- No grade 3-4 treatment-related TEAEs were observed.
- At the higher doses, treatment-related immune-related AEs were observed, particularly ALT increases and rash.

References
2. Health Survey Database. AACR Annual Meeting 2022.
3. CD200R1 was identified as a promising immuno-oncology (IO) target signaling pathway.
4. CD200R1 was identified as an immune checkpoint that enhances T cell-mediated antitumor activity.
5. AACR Annual Meeting 2022; Love JE et al.
6. CD200R1 pathway has been shown to promote an immunosuppressive tumor microenvironment in human cancers.
7. CD200R1 was identified as a promising immuno-oncology (IO) target.
8. Hashimoto's Asthma Allergic carcinoma Basal cell carcinoma
9. GNAS1 (Genome Aggregation) database for variants relevant to CD200R1 target discovery.
11. Tumor cell line expansion cohorts, including neuroendocrine cancers, small cell lung cancer, ovarian carcinoma, clear cell renal cell carcinoma and MSI-H/TMB-H cancers, in the ongoing Phase 2a.