

Cantargia presents data at an AACR Conference strengthening IL1RAP as a targetable hallmark in PDAC

- High IL1RAP protein expression on tumor cells is linked to poor survival in PDAC patients treated with chemotherapy, while this patient group has the longest survival when treated with nadunolimab in combination with chemotherapy.
- IL1RAP expressing cells in the characteristic tumor-supportive stroma of pancreatic cancer induce treatment resistance and can be targeted by nadunolimab.
- These data collectively suggest that IL1RAP is highly relevant in PDAC, contributes to severe disease and can be meaningfully targeted by nadunolimab.

Cantargia AB (Publ) (Nasdaq Stockholm: CANTA) today announced the presentation of two posters on the potential of nadunolimab in pancreatic ductal adenocarcinoma (PDAC) at an AACR special conference on pancreatic cancer in Boston, USA. The new data has been generated in collaboration with Herlev Hospital and Sylvester Comprehensive Cancer Center, part of the University of Miami Miller School of Medicine. The findings strongly underscore the role of IL1RAP in different aspects of PDAC, its significance as a drug target and involvement in treatment resistance. These data pave the way for nadunolimab in different treatment regimens targeting PDAC.

"These novel data highlight the unique features of IL1RAP in pancreatic cancer and strongly implicate that nadunolimab can make a meaningful difference for patients in this difficult disease. They point to a strategy for treatment of PDAC patients with the worst prognosis but also open new avenues for nadunolimab in other forms of cancer," said David Liberg, CSO of Cantargia.

The first poster presentation focuses on tumor cell expression of IL1RAP and was performed in collaboration with Herlev Hospital, Copenhagen, Denmark. High mRNA levels of IL1RAP in pancreatic tumors have previously been associated with shorter overall survival^{1,2}. In the tumor, IL1RAP is expressed on both tumor cells and other cells in the tumor-supporting microenvironment. Cantargia previously presented data from the CANFOUR trial showing a stronger effect of nadunolimab and gemcitabine/nab-paclitaxel treatment in first line metastatic PDAC patients with high levels of IL1RAP on their tumor cells where OS in this group was 14.2 months³. The new data measures protein expression of IL1RAP on tumor cells in baseline biopsies from a similar cohort from the BIOPAC biobank treated with gemcitabine/nab-paclitaxel. In contrast to the CANFOUR data, patients with higher tumor cell expression of IL1RAP showed a shorter overall survival (8.5 vs 10.0 months; $p=0.13$) and lower 2-year survival (3.5% vs 18%) compared to patients with a low IL1RAP expression. This was even more pronounced in patients with KRAS mutations where IL1RAP high patients had a significantly shorter survival (7.8 vs 10.2 months, $p=0.029$). These data strengthen the results from the CANFOUR trial and highlight the relevance of targeting IL1RAP by nadunolimab.

The second poster presentation shows groundbreaking work from the group of Dr. Jashodeep Datta at Sylvester Comprehensive Cancer Center of the University of Miami Miller School of Medicine in Miami, FL. These data demonstrate potent effects of a mouse surrogate antibody of nadunolimab (m-nadunolimab) in a hard-to-treat preclinical model of aggressive KRAS-mutated PDAC. In addition, treatment with m-nadunolimab could break resistance to chemoimmunotherapy in this model, leading to enhanced T cell activation and a stronger, synergistic effect in combination with chemotherapy and anti-PD1 therapy. In human PDAC samples, IL1RAP expression was shown to be elevated in the PDAC tumor microenvironment and selectively enriched in chemotherapy resistant samples. In specimens from the CANFOUR trial, high IL1RAP expression on stromal and immune cells was associated with prolonged duration of response to nadunolimab and gemcitabine/nab-paclitaxel treatment. Together, these findings suggest that the IL1RAP-expressing microenvironment represents a distinct therapeutic barrier in PDAC that could be targeted by nadunolimab to improve sensitivity to chemo- and immune-therapies.

"We are delighted to show data highlighting IL1RAP as a dominant protein and therapeutic barrier in the pancreatic tumor microenvironment. Our data suggest that targeting IL1RAP may be a revolutionary strategy in combination with other therapies," said Dr. Datta. "We have partnered with Cantargia to move these findings from the laboratory to patients with potentially operable pancreatic cancer. We look forward to continuing our collaboration for the benefit of our patients."

The posters will be presented at the AACR special conference in cancer research: Advances in pancreatic research – emerging science driven transformative solutions 2025 in Boston

Poster 1: B091 Interleukin-1 Receptor Accessory Protein (IL1RAP) Overexpression is Associated with Worse Outcome in PDAC and can be Reversed by Nadunolimab Treatment

Session date: September 30th, presentation by Dr. Camilla Rydberg Millrud from Cantargia

Poster 2: B006 Exploiting Myeloid-Stromal IL1RAP as a Therapeutic Vulnerability to Improve Chemoimmunotherapy Sensitivity in Pancreatic Cancer

Session date: September 30th, by Dr. Harper (Maggie) Mash from University of Miami Miller School of Medicine.

Posters are attached to this press release and will be made available for download at Cantargia's [website](#).

References

¹ Zhang et al, J Hematol Oncol 2022, 15:70

² Hansen et al, JITC 2024, 12:e009523

³ van Cutsem et al, Clin Cancer Res 2024, 30: 5293-5303

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About Cantargia

Cantargia AB (publ), reg. no. 556791-6019, is a biotechnology company that develops antibody-based treatments for life-threatening diseases and has established a platform based on the protein IL1RAP, involved in a number of cancer forms and inflammatory diseases. Cantargia's oncology program, the antibody nadunolimab (CAN04), is being studied clinically, primarily in combination with chemotherapy with a focus on pancreatic cancer, non-small cell lung cancer and triple-negative breast cancer. Positive data for the combinations indicate stronger efficacy than would be expected from chemotherapy alone. Cantargia's second development program, the antibody CAN10, blocks signaling via IL1RAP in a different manner than nadunolimab and addresses treatment of serious autoimmune/inflammatory diseases. In September 2025, the acquisition of CAN10 by Otsuka Pharmaceutical was completed.

Cantargia is listed on Nasdaq Stockholm (ticker: CANTA). More information about Cantargia is available at www.cantargia.com.

About nadunolimab (CAN04)

Nadunolimab is an antibody that binds strongly to its target IL1RAP and functions by inducing ADCC and blocking IL-1 α and IL-1 β signaling. Nadunolimab can thereby counteract the IL-1 system which contributes to the immune suppressive tumor microenvironment and the development of resistance to chemotherapy. Nadunolimab has been investigated in multiple clinical trials; the phase I/IIa trial CANFOUR, [NCT03267316](#), evaluated nadunolimab in combination with standard chemotherapies in patients with pancreatic ductal adenocarcinoma (PDAC) (gemcitabine/nab-paclitaxel) or non-small cell lung cancer (NSCLC) (platinum-based chemotherapies). Positive data show durable responses for combination therapy in 73 PDAC patients, resulting in a median iPFS of 7.2 months and median OS of 13.2 months. An even higher median OS of 14.2 months was observed in a subgroup of patients with high tumor levels of IL1RAP. Intriguing efficacy was observed in a small group of non-squamous NSCLC patients post PD(L)-1 therapy.

Attachments

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Poster 1 #B091 Rydberg Millrud Et Al

Poster 2 #B006 Marsh Et Al