

ORTHOTOPIC AND METASTATIC BRAIN TUMOR MODELS

Brain tumors are associated with significant morbidity and mortality and are often difficult to treat due to:

- Blood-brain barrier limits the entry of substances, including therapeutic agents
- Tumor location and invasiveness make complete surgical removal challenging
- · Brain tumors can be genetically diverse, which can affect treatment response and contribute to resistance to therapies
- · Some brain tumors, particularly glioblastomas, have a high resistance to standard treatments like radiation and chemotherapy
- · The brain is a complex and delicate organ, and its treatment carries the risk of causing neurological damage

Preclinical brain tumor models have played a fundamental role in understanding tumor biology and developing anti-tumor strategies.

Preclinical In Vivo Models

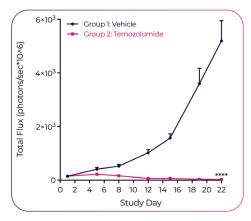
Tumor Type	Inoculation Route	Pros	Cons	Applications	
Primary	• Intracranial	Clinically relevant location Clinically relevant microenvironment	Surgical procedure Higher cost	Targeted therapyIO therapyCombo therapy	
	Subcutaneous	Lower cost	Less relevant to clinical setting	Targeted therapy	
Metastatic CDX PDX Syngeneic	Intracarotid	Clinically relevant Intact BBB	Technically challenging surgical procedure	Targeted therapy IO therapy	
	Intracranial	Clinically relevant Mostly Intact BBB	Surgical procedure	Combo therapy	
	Spontaneous met	Clinically relevant Intact BBB	Not all models will develop brain met Technically challenging Require large N numbers		

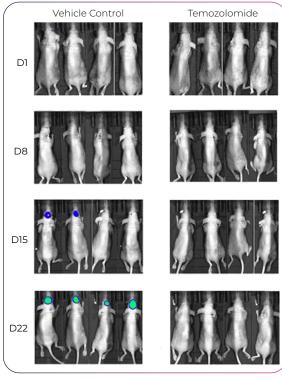
Validated Models

	Intracranial	Intracranial Models	Intracarotid Models	
Orthotopic	Metastatic		• NCI-H1975-Luc • A375-Luc	 A375-Luc NCI-H358-Luc
U-87 MG-Luc2U251-LucAM-38-LucU-87 MG-EGFRVIII- Luc	A375-LucNCI-H358-LucPC-9-LucNCI-H1975-LucNCI-H1299-Luc	xMDA-MB-468-LucxMDA-MB-231-LucxBT474-LucSKLU-LucGP2D-Luc	PC-9-LucNCI-H358-Luc	• PC-9-Luc

U87 MG-Luc2 Intracranial Orthotopic Model

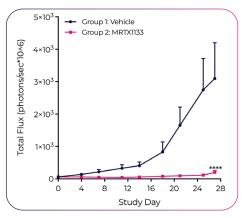
- Human glioblastoma cell line U-87 MG (ATCC) was transduced to express firefly luciferase (100% STR profile match).
- Brain tumors established by orthotopic cell implantation into the right hemisphere of nude mice.
- Treatment: Temozolomide showed a statistically significant reduction in tumor bioluminescence (n=8, p<0.0001).

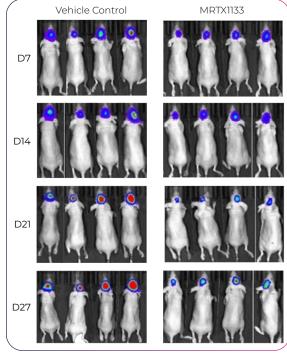




GP2D-Luc Intracranial Metastatic Model

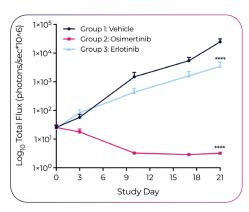
- Human colorectal cancer cell line GP2D sourced from ECACC, engineered to express firefly luciferase (100% STR profile match).
- Brain tumors established following intracranial implantation of tumor cells into the right hemisphere of nude mice.
- Treatment: MRTX1133 showed a statistically significant reduction in tumor bioluminescence (n=6, p<0.0001).

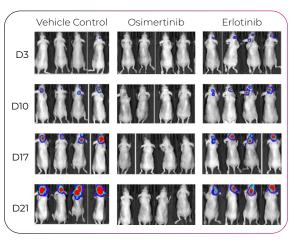




PC-9-Luc Human Lung Cancer Intracarotid Metastatic Model

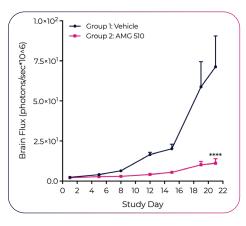
- PC-9 is a lung adenocarcinoma cell line with a deletion in exon 19 of the EGFR gene that exhibits high sensitivity to TKIs.
- Brain tumors developed following intracarotid injection of cells into nude mice.
- Treatment: Osimertinib and Erlotinib showed statistically significant reductions in tumor bioluminescence (n=10, p<0.0001).

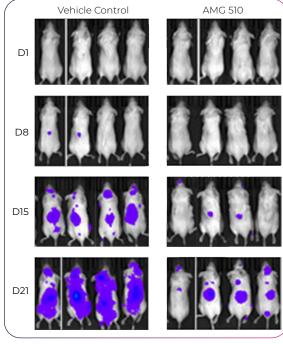




NCI-H358-Luc Intracardiac Metastatic Model

- Human non-small cell lung carcinoma cell line NCI-H358 sourced from ATCC, engineered to express firefly luciferase (100% STR profile match).
- Brain tumor and disseminated metastases established following intracardiac injection of cells into NCG mice.
- Treatment: AMG 510 showed a statistically significant reduction in tumor bioluminescence (n=6, p<0.0001).





Summary

The utilization of *in vivo* orthotopic and metastatic models, including the intracranial, intracardiac and intracarotid models, represents a critical approach in advancing our knowledge of tumour biology and facilitating the development of novel therapeutic strategies for combating brain cancer.

The intracarotid model, in particular, offers a highly relevant and clinically translatable framework for studying brain metastases.

Our technical spotlight offers a comparative response to SoC treatment of NCI-H358-Luc tumors implanted via the intracranial, intracarotid and intracardiac routes.

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