

Targeting AML dependency on VCP-mediated DNA repair through a selective second-generation small molecule inhibitor

Blandine Roux, Camille Vaganay, Jesse D Vargas, Gabriela Alexe, Chaima Benaksas, Bryann Pardieu, Nina Fenouille, Jana M Ellegast, Edyta Malolepsza, Frank Ling, et al.

To cite this version:

Blandine Roux, Camille Vaganay, Jesse D Vargas, Gabriela Alexe, Chaima Benaksas, et al.. Targeting AML dependency on VCP-mediated DNA repair through a selective second-generation small molecule inhibitor. Science Translational Medicine, 2021 . hal-03432900

HAL Id: hal-03432900 <https://hal.science/hal-03432900v1>

Submitted on 17 Nov 2021

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.

Targeting AML dependency on VCP-mediated DNA repair through a selective second-generation small molecule inhibitor

Blandine Roux^{1*}, Camille Vaganay^{1*}, Jesse D. Vargas², Gabriela Alexe^{3,4}, Chaima Benaksas¹, Bryann Pardieu¹, Nina Fenouille¹, Jana M. Ellegast^{3,4}, Edyta Malolepsza⁴, Frank Ling¹, Gaetano Sodaro¹, Linda Ross^{3,4}, Yana Pikman^{3,4}, Amy S. Conway^{3,4}, Yangzhong Tang², Tony Wu², Daniel J. Anderson², Ronan Le Moigne², Han-Jie Zhou², Frédéric Luciano⁵, Christina R. Hartigan⁴, Ilene Galinsky⁶, Daniel J. DeAngelo⁶, Richard M. Stone⁶, Patrick Auberger⁵, Monica Schenone⁴, Steven A. Carr⁴, Josée Guirouilh-Barbat⁷, Bernard Lopez⁷, Mehdi Khaled⁸, Kasper Lage⁴, Olivier Hermine⁹, Michael T. Hemann¹⁰, Alexandre Puissant^{1#}, Kimberly Stegmaier^{3,4#} and Lina Benajiba $1#$

¹ Université de Paris, INSERM U944 and CNRS UMR 7212, Institut de Recherche Saint Louis, Hôpital Saint Louis, APHP, Paris, FRANCE;

² Cleave Therapeutics, Inc, Burlingame, CA, USA;

³ Department of Pediatric Oncology, Dana-Farber Cancer Institute and Boston Children's Hospital, Harvard Medical School, Boston, MA, USA;

⁴The Broad Institute of Harvard University and Massachusetts Institute of Technology, Cambridge, MA, USA;

⁵C3M, INSERM U1065, Team Cell Death, Differentiation, Inflammation and Cancer, Nice, FRANCE;

⁶ Department of Medical Oncology, Dana-Farber Cancer Institute, Harvard Medical School, Boston, MA, USA;

⁷CNRS UMR 8200, Gustave-Roussy Cancer Center, Université Paris-Saclay, Equipe Labellisée Ligue Contre le Cancer, Villejuif, FRANCE;

⁸INSERM U1186, Gustave-Roussy Cancer Center, Université Paris-Saclay, Villejuif, FRANCE;

⁹ Université de Paris, INSERM U1163 and CNRS 8254, Institut Imagine, Hôpital Necker, APHP, Paris, FRANCE;

¹⁰ Koch Institute for Integrative Cancer Research at Massachusetts Institute of Technology, Massachusetts Institute of Technology, Cambridge, MA, USA;

*: These authors contributed equally to this work.

: These senior authors contributed equally to this work.

Corresponding authors:

lina.benajiba@inserm.fr

kimberly_stegmaier@dfci.harvard.edu

alexandre.puissant@inserm.fr

ABSTRACT

The development and survival of cancer cells require adaptive mechanisms to stress. Such adaptations confer intrinsic vulnerabilities, enabling the selective targeting of cancer cells. Through a pooled *in vivo* shRNA screen, we identified the AAA-ATPase VCP as a top stress-related vulnerability in acute myeloid leukemia (AML). We established that AML was the most responsive disease to chemical inhibition of VCP across a panel of 16 cancer types. The sensitivity to VCP inhibition of human AML cell lines, primary patient samples, and syngeneic and xenograft mouse models of AML was validated using VCP-directed shRNAs, overexpression of a dominant negative VCP mutant, and chemical inhibition. By combining a mass spectrometry-based analysis of the VCP interactome and phospho-signaling studies, we determined that VCP is important for ATM kinase activation and subsequent DNA repair in AML. Finally, we report a second-generation, clinical candidate VCP inhibitor, CB-5339, and validate its efficacy in multiple AML models, providing data to support the clinical testing of single agent CB-5339 or its combination with standard of care AML DNA damaging chemotherapy.

Keywords: AML, VCP, DNA damage repair, ATM, CB-5339

Single sentence summary: AML cell dependency on the DNA repair function of the AAA-ATPase VCP offers a therapeutic avenue.

INTRODUCTION

The past two decades of basic and translational cancer research have brought into the clinic a myriad of small molecules targeting oncogenic dependencies driven by oncogene mutations. The treatment of acute myeloid leukemia (AML) has seen recent progress with the FDA-approval of drugs for patients with mutations in *FLT3* (midostaurin and gilteritinib), *IDH2* (enasidenib) and *IDH1* (ivosidenib) (*1-3*). Although conceptually attractive and clinically effective in a subset of patients, targeting mutated oncogenes is not always feasible, for reasons such as loss-of-function mutations, difficult to drug oncogenic drivers, or lack of identified mutated drivers. Additionally, clonal evolution under targeted selective pressure frequently results in drug-resistant clonal outgrowth (*4*).

An emerging alternative therapeutic approach relies on targeting non oncogenic driver pathways essential for tumor survival, such as cellular stress response (*5, 6*). Systematic functional genomic screens, using shRNA or CRISPR/Cas9, have recently revealed such new therapeutic targets in a number of cancers not suggested by their mutational profiles (*7*). In some cases, *in vitro* screens are sufficient to identify high fidelity dependencies subsequently validated both *in vitro* and *in vivo*. In other cases, particularly in the context of metabolic, immunologic, proteotoxic, or DNA damage stress response targets, an *in vivo* approach may enhance the identification of true positives.

These evolutionaly conserved stress response pathways are rewired in cancers, such as AML, to permit tumorigenesis and cancer cell survival in the face of oncogenic stress. Indeed, these escape mechanisms allow the clonal selection of cells which can

3

proliferate despite accumulation of damage, thus increasing the risk of full transformation in a premalignant cell (*8*). Although necessary for leukemogenesis, these adaptive mechanisms also confer an intrinsic vulnerability and an attractive therapeutic opportunity to selectively target AML cells. Indeed, cellular survival under such unfavorable conditions becomes highly dependent on proficient stress response pathways. Disrupting this common hallmark of cancer through stress sensitization and/or stress overload should ultimately result in cancer cell death (*5*). For example, targeting oxidative and metabolic stress through BCL-2 inhibition has been shown to have anti-leukemic activity in multiple preclinical models (*9*). These studies have been recently validated with the promising efficacy of the selective BCL-2 inhibitor venetoclax, now FDA-approved for a subset of patients with AML, combined with low dose cytarabine or hypomethylating agents (*10-13*). Therefore, developing functional approaches to unravel such cellular mechanisms to evade stress surveillance may open new therapeutic avenues for AML treatment. Here, we performed an *in vivo* pooled shRNA screen in an AML mouse model driven by the MLL-AF9 translocation to identify new druggable targets involved in cellular stress reponse pathways.

RESULTS

An *in vivo* **shRNA screen identifies VCP as an AML dependency.**

To find therapeutic gene candidates in AML, we designed a custom shRNA library of 2,115 shRNAs targeting 429 genes implicated in various adaptive stress response pathways. This library, cloned into a doxycycline-inducible vector, was transduced as a pool into L-GMP primary MLL-AF9 cells reinjected into sub-lethally irradiated secondary syngeneic recipient mice (*14, 15*) (**Fig. 1A**). Using an EdgeR/RIGER comparative analysis of the relative representation of the library hairpins between the two groups of mice treated with and without doxycycline, we identified *Vcp*, an AAA-ATPase family member, as a top scoring hit (**Fig. 1B and table S1**). As expected, multiple hairpins directed against the tumor suppressor gene, *PTEN* (*16*), as well as a previously described metabolic cancer dependency gene, *LDHA*, scored among the top enriched and depleted genes respectively (*17*), providing support for the overall screen quality. We first validated the dependency of the MLL-AF9 blasts on Vcp using two *Vcp*-directed shRNAs whose efficiency was validated by western blot (**Fig. 1C**). Doxycycline-induced *Vcp* knockdown reduced the MLL-AF9-driven disease burden in mouse bone marrow, spleen and peripheral blood as evaluated by flow cytometry (**Fig. 1D)** and prolonged survival, thereby confirming Vcp dependency in this AML model (**Fig. 1E**). Because mice ultimately succumbed to AML despite the initial disease burden clearance following *Vcp* knockdown, we further evaluated disease relapse characteristics in this murine model. Interestingly, at time of death, *Vcp* knocked down mice harbored a leukemic burden mainly composed of non shRNA-expressing cells, suggesting that disease relapse may result from a positive selection of leukemic cells that have escaped the doxycycline-induced shRNA knock-down (**Fig. 1F and fig. S1, A-C**). These results thus further validate AML cell dependency on *Vcp*.

VCP is an ATPase protein chaperone which adopts a homo-hexameric conformation comprising six identical subunits arranged in a ring. Each monomeric subunit contains two tandem AAA-ATPase domains responsible for ATP binding and hydrolysis (D1 and D2). The main ATPase activity is contained in the D2 domain. We further evaluated the VCP dependency in the MLL-AF9 cells using a previously reported ATPasedeficient, mutant form of VCP (E305Q, E578Q). This mutant VCP is unable to hydrolyze ATP but still incorporates into WT hexamers, and thus exhibits a dominant negative (DN) function on the complex by abrogating its ATPase activity (*18, 19*). VCP DN was tagged with a ligand-dependent destabilization domain (DD) whose function was to constitutively destabilize VCP DN. Treatment with the membrane-permeable DD ligand, Shield-1, was then used to block the DD function and stabilize VCP DN in MLL-AF9 cells (**Fig. 1G**). Shield-1-induced VCP DN overexpression was sufficient to impair the MLL-AF9-driven disease expansion (**Fig. 1H)** *in vivo* and prolonged mice survival, thereby establishing that the ATPase activity of VCP is required for AML progression (**Fig. 1I**).

AML is preferentially sensitive to VCP inhibition.

To evaluate whether VCP inhibition elicited a preferential response in AML, we expanded our investigation to a panel of 131 human cancer cell lines, representing 16 cancer types, with the ATP-competitive, small-molecule VCP inhibitor CB-5083 (*20, 21*). AML was more sensitive to CB-5083 compared to other cancer subtypes, suggesting that AML is highly dependent on VCP (**Fig. 2A and table S2**). To further validate these results, we treated a panel of 16 AML cell lines with CB-5083 and a highly-selective allosteric VCP inhibitor NMS-873 (*22*). The sensitivity of the AML cell lines to these two VCP inhibitors was strongly correlated (Spearman score $= 0.8$), supporting their on-target effect (**Fig. 2B**). Moreover, expression of a mutated form of *VCP* (A530T), which confers resistance to NMS-873 (*23*), in UT-7 cells rescued the loss of viability induced by NMS-837, thereby confirming the selectivity of NMS-873 for VCP in an AML context **(Fig. 2C)**.

The anti-leukemic effect of reduced VCP expression and activity was then investigated in three human AML cell lines expressing *VCP*-directed shRNAs **(Fig. 2D)** or overexpressing the WT or DN VCP (**Fig. 2E).** Impairment of VCP expression or function markedly decreased viability of the AML cell lines MV4-11 and UT-7, whereas the NOMO-1 cell line was relatively resistant to VCP inhibition, suggesting that all AML subtypes are not equally dependent on VCP (**Fig. 2, D and E**). The decreased cell viability observed is specific to the loss of VCP function, as the overexpression of WT VCP did not impair cell growth. Of note, the profile of sensitivity of these cell lines to *VCP* knockdown and VCP DN overexpression matched their sensitivity to VCP chemical inhibition, supporting on-target activity of both the genetic and chemical tools.

Additionally, VCP impairment through either chemical inhibition or VCP DN overexpression resulted in a decreased colony forming ability (**Fig. 2F**). Finally, using Annexin V/propidium iodide staining and flow cytometry analysis of the two most VCP-dependent AML cell lines, MV4-11 and UT-7, we determined that inhibition of VCP ATPase activity using either NMS-873 or overexpression of exogenous VCP DN induced Annexin-positive cell death consistent with apoptosis (**Fig. 2G**).

VCP inhibition efficiently targets leukemic cells in multiple *in vivo* **AML models and primary AML patient samples.**

In order to confirm the anti-leukemic effect of VCP impairment in human AML *in vivo*, we first induced VCP DN overexpression using Shield-1 in MV4-11 cells injected into immunocompromised NSG mice. As we observed in **Fig. 1, G-H** in the MLL-AF9 syngeneic mouse model, VCP DN overexpression delayed disease progression and improved survival in this MV4-11 orthotopic xenograft model (**Fig. 3, A and B**). Because NMS-873 does not possess pharmacokinetic properties suitable for *in vivo* testing, we then evaluated the efficacy of the orally-bioavailable drug candidate recently tested in a phase I clinical trial in patients with advanced solid tumors : CB-5083, in both the MLL-AF9 syngeneic and MV4-11 xenograft mouse models (*20, 21*) (NCT02243917). CB-5083 treatment decreased disease burden (**Fig. 3, C-E**) and prolonged mice survival in both AML models (**Fig. 3, F and G**). Importantly, no major weight loss or hematopoietic toxicity based on complete blood counts was observed upon CB-5083 treatment (**fig. S2, A-D**).

To further demonstrate the clinical potential of VCP inhibition as an anti-AML therapy, we then treated leukemia cells from five patients with AML and established that the blockade of VCP activity, using either NMS-873 or CB-5083, impaired the capacity of AML blasts to form colonies in methylcellulose (**Fig. 3, H-I and table S3**). In line with this data, CB-5083 also substantially decreased disease burden in an orthotopic patientderived xenograft (PDX) model of therapy-related MLL-AF9 positive AML (**Fig. 3J and table S3**).

Together, these results indicate that primary patient AML blasts and AML cell lines are dependent on the enzymatic activity of VCP for survival and proliferation, both *in vitro* and *in vivo*.

Inhibition of the nuclear function of VCP alters AML cell line viability through impairment of DNA repair.

VCP is reported to have many functions in the cell, but the mechanism promoting the exquisite dependency in AML was unclear. Previous studies demonstrated that VCP inhibition triggers the endoplasmic reticulum (ER)-associated protein degradation pathway, promotes accumulation of poly-ubiquitinated proteins and generation of proteotoxic stress associated with activation of the unfolded protein response pathway (*24, 25*). In contrast to these reports, neither NMS-873 treatment nor overexpression of VCP DN induced accumulation of poly-ubiquitinated proteins **(Fig. 4A and fig. S3A)** or promoted accumulation of the ER stress marker GRP78 **(fig. S3B)** at a concentration of NMS-873 observed to impair viability in AML. Poly-ubiquitinated proteins start to accumulate when AML cells are exposed to 5 μ M (100-fold the IC50) of NMS-873 (**fig. S3C**). Moreover, in the panel of 16 AML cell lines tested, sensitivity to NMS-873 did not correlate with sensitivity to bortezomib, a proteasome inhibitor **(fig. S3D),** and VCP inhibition did not result in any marked changes in the caspase-, trypsin-, or chymotrypsin-like enzymatic activities of the proteasome at concentrations altering cellular viability **(fig. S3E)**.

To further investigate the mechanism of action by which VCP inhibition may alter AML growth, we exploited the fact that VCP is present in both the nucleus and cytoplasm of AML cells in order to ask whether AML cell survival relies more on the nuclear or the cytoplasmic pool of VCP. Therefore, we depleted endogenous VCP concomitantly with overexpression of a codon optimized non shRNA targetable exogenous VCP WT or VCP WT fused to a Nuclear Export Signal (NES), in the MV4- 11 AML cell line. We validated by subcellular fractionation that this NES mutant VCP WT remained largely absent from the nucleus of MV4-11 AML cell lines (**Fig. 4B**). As expected, VCP knockdown decreased cellular viability in the MV4-11 AML cell line. Although this effect was significantly abolished by codon optimized VCP WT overexpression ($p<0.0001$), VCP WT NES failed to restore MV4-11 cell viability to the same extent as its WT counterpart, thus suggesting an essential role for VCP in nuclear signaling pathways in AML (**Fig. 4C**). To further support the nuclear essentiality of VCP in AML, we fused a Nuclear Export Signal (NES) to the VCP DN mutant to drive its constitutive export from the nucleus (**Fig. 4D**). Restricting VCP DN localization to the cytoplasm abrogates its cytotoxic effects on these cells, therefore arguing again for a role of the nuclear fraction of VCP in AML cells survival (**Fig. 4E**).

To investigate the nuclear functions of VCP in AML, we performed an unbiased mass spectrometry-based characterization of the VCP interactome in the MV4-11 AML cell line, one of the most sensitive cell lines to VCP inhibition. MV4-11 cells were infected with either a V5-tagged VCP or an empty control vector before V5 immunoprecipitation and mass-spectrometry analysis. A total of 735 VCP protein partners were identified **(table S4)**. Two previously described critical VCP substrate adapters, NPLOC4 and UFD1L, scored as top VCP interactors in our screen, thereby acting as internal positive controls and validating our mass-spectrometry approach **(fig. S4A**). The 92 top scoring hits (p-value < 0.05 and log₂ (FC) > 0.5) are represented in the interactome network in **Fig. 4F.** We interrogated this list of top scoring hits with published, validated gene signatures for enrichment by pathway analysis **(table S5)** and established that VCP interacts with 41 nuclear proteins markedly enriched among DNA damage recognition and repair pathways **(Fig. 4F and table S5)**. To better explore the VCP interactome in an AML context, we compared our data with previously reported VCP interactome data in HEK-293T cells (*26*). The overlap and differences between both cellular contexts are highlighted in **fig. S4, B and C** and **table S6**. Eighty high confidence VCP-interacting proteins were only identified in the MV4-11 AML cell line (**fig. S4C**). Interestingly, this AML interactors were markedly enriched among DNA repair and replication pathways in an unbiased enrichment overlapping analysis (**fig. S4D**). In a similar enrichment analysis, VCP-interacting proteins only detected in the HEK-293T cellular context were mainly enriched among mRNA processing and not DNA repair pathways (**fig. S4E)**.

Based on these results, we then assessed phosphorylation of the histone H2AX (termed as γH2AX), which reflects accumulation of double-strand breaks (DSB) in DNA. Inhibition of VCP using either NMS-873 treatment or VCP DN overexpression increased γH2AX in MV4-11 and UT-7 AML cell lines as was observed in cells treated with etoposide, a topoisomerase inhibitor that induces DSBs (**Fig. 4,G and H**).

Given that the two major DNA repair pathways in response to DSB are homologous recombination (HR) and non-homologous end-joining (NHEJ), we then explored the effects of VCP impairment on these pathways. We used two reporter systems to evaluate induction of either HR or NHEJ in response to I-SceI overexpression. This endonuclease creates a targeted DSB in an eGFP or CD4 reporter sequence. Successful repair of the DSB by either HR or NHEJ results in the reconstitution of functional eGFP or CD4, which can be quantified using flow cytometry (**Fig. 4, I and J**). As expected, we observed that pharmacological inhibition of the serine/threonine kinase ATM, a key component of the HR repair pathway (*27, 28*), impaired HR-mediated DSB repair. Inhibition of VCP with NMS-873 also led to an impairment of HR, whereas it did not impair NHEJ, suggesting that VCP plays an important role in HR DSB repair.

Taken together, these results suggest that VCP inhibition impedes the activation of HR DNA repair pathways, thereby promoting DNA damage accumulation in leukemic cells.

VCP inhibition impairs ATM phosphorylation and downstream signaling resulting in increased sensitivity to DNA damaging agents.

Many key mammalian DNA damage response signaling pathways stem from activation of the canonical serine/threonine kinase ATM (*27, 28*). Interestingly, we observed that the pattern of sensitivity to pharmacological inhibition of this key genome guardian using the ATM inhibitor KU-55933, in a panel of 16 AML cell lines **(Fig. 5A)** and 16 primary AML patient samples **(Fig. 5B and table S3),** was highly correlated with their sensitivity to NMS-873 (Spearman score $= 0.8$ and 0.7 respectively). To evaluate the impact of VCP impairment on the DNA damage signaling response, we used etoposide to induce DSBs. We then evaluated the downstream DNA repair signaling cascade after either genetic (VCP DN overexpression) or chemical inhibition of VCP. These experiments were performed using short-term VCP impairment, to allow the evaluation of early effects on DNA repair signaling, before high cellular DNA damage accumulation. Consistent with our previous results, we established that VCP inhibition blocked DSB-induced activation of ATM signaling **(Fig. 5, C and D)** and ATM's wellreported protein substrates, BRCA1, SMC1 and KAP1 **(Fig. 5E),** suggesting that VCP plays a central role in DNA damage sensing and repair in AML. Moreover, in line with a role for VCP at the crosstalk between DNA damage response pathways and AML growth, we established that VCP inhibition sensitizes AML cells to DNA damaging agents, such as irradiation (**Fig. 5, F and G**) and the anthracycline doxorubicin (**Fig. 5, H and I**).

Together, these results suggest that the anti-leukemic effect of VCP inhibition might result from inefficient DNA damage recognition and repair. Therefore, these findings nominate VCP inhibition as a potential therapeutic avenue to treat patients with AML and support further preclinical studies to test it in combination with standard chemotherapy regimens using anthracyclines.

CB-5339, a second-generation, potent and selective VCP small-molecule inhibitor offers a promising therapeutic avenue for AML.

CB-5083 is a first-in-class ATP-competitive VCP inhibitor that was recently tested in two phase I clinical trials in solid tumors and multiple myeloma (*20, 21*) (NCT02243917, NCT0223598). The clinical development of this drug candidate was halted due to an unexpected off-target inhibitory action on phosphodiesterase 6 (PDE6), a key regulator of the retinal phototransduction cascade (*29*), thus resulting in ophthalmological side effects. This finding is reminiscent of the vision disturbances caused by PDE5 inhibitors, which were developed for the treatment of erectile dysfunction and had cross-reactivity with PDE6 (*30*).

In order to translate our findings into the clinic, a second-generation, highly selective and potent ATP-competitive, oral, small molecule inhibitor of VCP, CB-5339, was developed (**Fig. 6A**). CB-5339 is 15-fold less active on the human cone PDE6 (PDE6C) in *in vitro* biochemical assays, and displays a 31-times lower Cmax *in vivo* in rat retina compared to CB-5083, thus addressing the off-target limitations of the first-generation compound (**Fig. 6B**). Importantly, CB-5339 retains the high on-target potency of CB-5083 and displays a similar sensitivity profile across a panel of 138 cell lines (**Fig. 6C**). To further characterize the molecular inhibition of VCP using this second-generation drug candidate, the previously established HCT116 colon cancer CB-5083 resistant cell lines were treated with either CB-5083 or CB-5339 (*20*). These resistant cell lines harbor *VCP* mutations mainly located in or adjacent to the D2 ATPase domain of VCP. Both compounds showed a comparable biochemical efficacy profile, thus arguing for a similar molecular inhibitory mechanism, and retention of the on-target effect of the first-generation compound on VCP (**Fig. 6D**). The efficacy of CB-5339 was then assessed in our panel of 16 AML cell lines and was accordingly correlated to the firstgeneration inhibitor CB-5083 (**Fig. 6E**). Importantly, CB-5339 efficacy was also validated on a panel of 16 primary AML patient samples harboring diverse genetic backgrounds (**table S3**). The median IC50 was 375 nM among these samples, thus supporting the translational potential of CB-5339 (**Fig. 6F**).

To further validate our mechanistic hypothesis using the clinical candidate CB-5339, we first studied its effects on polyubiquitin protein accumulation and the activation of the unfolded protein response (UPR) in an AML context. CB-5339 treatment induced dose-dependent polyubiquitin protein accumulation at concentrations $\geq 0.4 \mu M$ (fig. **S5A**). Similarly, the ER stress marker GRP78 accumulated at concentrations $\geq 0.4 \mu M$, while spliced XBP-1 and ATF-4 accumulated after treatment with CB-5339 at concentrations ≥ 1.6 µM and 0.8 µM respectively (**fig. S5B**) arguing for a concentration-dependent increase in proteotoxic stress. We also explored DNA damage response signaling after CB-5339 treatement to evaluate whether CB-5339 also impaired DNA repair at concentrations impacting cellular viability in AML (MV4-11 $IC_{50} = 0.18 \mu M$). Importantly, CB-5339 treatment impaired ATM phosphorylation upon etoposide DSBs induction (**fig. S5C**) and increased γH2AX accumulation at 0.2 µM (**fig. S5D**). Accordingly, CB-5339 also synergized with doxorubicin in the MV4- 11 AML cell line (**fig. S5E**). CB-5339 thus displays both a nuclear and a cytoplasmic effect on AML cell lines. Lower concentrations impair DNA repair while higher concentrations result in proteotoxic stress, with both potentially contributing to the viability effect observed with CB-5339 treatment of AML cells. To further evaluate the relative importance of each effect on AML cellular viability, we studied the pattern of sensitivity of 16 AML cell lines to CB-5339 compared to either the proteasome inhibitor bortezomib or the ATM inhibitor KU-55933. Cellular sensitivity to CB-5339 across this panel of AML cell lines was not correlated with bortezomib response while it was strongly correlated with KU-55933 sensitivity (Spearman score = 0.67) (**fig. S5, F and G**). These results are similar to those observed with the allosteric inhibitor of VCP; NMS-873 and are in line with our rescue experiments arguing for a strong dependency of AML on the nuclear function of VCP.

Compared to CB-5083, CB-5339 has a lower clearance in preclinical studies in multiple species, thus providing for a higher bioavailability (**fig. S6A**). In order to confirm that the highly conserved on-target activity of CB-5339 against VCP translated into a similar *in vivo* efficacy, we used a MLL-AF9 driven patient derived xenograft (PDX) AML mouse model. As observed with CB-5083, CB-5339 treatment resulted in decreased bone marrow leukemic infiltration and prolonged mice survival (**Fig. 6,G and H**).

Similar to the results obtained with this PDX model, CB-5339 treatment decreased circulating leukemic cells and prolonged survival in the MLL-AF9 syngeneic mouse model (**Fig. 6, I and J**). Moreover, CB-5339 synergized *in vivo* with standard of care AML chemotherapy, a combination of an anthracycline and cytarabine. This triple combination regimen resulted in decreased leukemia burden and prolonged mouse survival compared to each regimen alone (**Fig. 6, K and L**). Importantly, CB-5339 was well tolerated as evidenced by stable weight curves and absence of substantial myelosuppression (**fig. S6, B-E**).

At time of disease relapse, no marked difference in disease burden or cell surface myeloid differentiation markers were observed (**fig. S6, F and G**). Consistently, differentiation markers were not substantially increased at time of initial disease burden evaluation post-CB-5339 treatment (**fig. S6H**). These results suggest that CB-5339 does not induce phenotypic differentiation of myeloid leukemia cells and are in agreement with our mechanistic model based on leukemic cell apoptosis rather than cell differentiation.

Together, these data suggest that the nuclear function of VCP is critical for AML cell survival and uncover a promising therapeutic avenue for the use of the secondgeneration inhibitor, CB-5339, in combination with standard of care AML chemotherapy regimens.

Co-occurrence of RAS oncogene activation and TP53 deficiency is associated with impaired response to VCP inhibition.

One fundamental step to accelerate the clinical translation of our findings relies on the identification of the most or least responsive AML subgroups to VCP inhibition. To address this question, we first evaluated *VCP* mRNA expression based on the publicly available Cancer Cell Line Encyclopedia (CCLE) database (https://depmap.org/portal/download/; (*31, 32*)). No correlation was observed between *VCP* expression and cancer cell line sensitivity to CB-5339 in our panel of AML cell lines (12 available in CCLE) nor in our pan-cancer sensitivity screen (91 cell lines available in CCLE) (**Fig. 7, A and B**). VCP is thus ubiquitously expressed with very low variation among different cancer cellular contexts and does not explain the differential sensitivity to VCP inhibition.

Because of the role of DNA repair impairment in the underlying mechanism of AML growth blockade by VCP inhibition, we next evaluated both γ-H2AX and pATM basal expression using a quantitative flow cytometry approach in two sensitive and two resistant AML cell lines. Neither of these DNA damage-related markers was correlated with VCP sensitivity (**Fig. 7, C and D**).

To further assess for biomarkers of VCP sensitivity or resistance in AML, we then analyzed the mutational profiles of the 16 AML cell lines screened for sensitivity to the VCP inhibitor NMS-873 using the CCLE database (https://depmap.org/portal/download/; (*31, 32*)). Because our initial screen was performed in an MLL-driven mouse model, we first evaluated the impact of MLL rearrangement on VCP dependency. The MLL status was not associated with increased sensitivity to NMS-873. No specific single mutation was associated with VCP sensitivity nor with VCP resistance.

Given the poor prognosis of *TP53* and *RAS* mutations in AML and their potential effect on the DNA repair pathways, we then explored whether the combination of these mutations was associated with resistance to VCP inhibition. We found that harboring co-occurring activating mutations in one of the RAS family genes (*KRAS* or *NRAS*) and deleterious mutations in the *TP53* gene is associated with decreased response to VCP inhibition (two tailed Fisher exact test odds ratio $= 2.67$, P-value $= 0.002$) **(Fig. 7E and table S7).** Consistently, the top 4 sensitive cell lines EOL-1, MV4-11, U937 and UT-7 harbor at most a single splice site mutation for *TP53* and no mutation for *KRAS* or *NRAS*. *KRAS/NRAS* and *TP53* mutational co-occurrence was associated with decreased response to VCP inhibition using NMS-873, CB-5083 and CB-5339 **(Fig. 7F)**.

Using the pan-cancer TCGA database (https://cancergenome.nih.gov/publications; (*33*)), we observed that the frequency of *TP53* and *RAS* mutations co-occurrence in AML was among the lowest across the 33 TCGA cancer cohorts **(Fig. 7G and table S8)**, potentially generating a preferential VCP vulnerability in AML. This observation was validated using recently developed functional classifiers allowing identification of *TP53* deficiency (*34*) and *RAS* activation (*35*) **(Fig. 7H and table S8)**.

Together, this data suggests that co-occurrence of *TP53* deficiency and *RAS* pathway activation renders cancer cells less sensitive to VCP inhibition and highlights a useful biomarker that could inform future clinical trials.

DISCUSSION

Our studies revealed a strong dependency of AML on the multifunctional AAA-ATPase VCP. VCP recently has been reported to play a role in solid tumors and multiple myeloma progression through regulation of protein homeostasis and ER stress (*20, 22, 36*). In contrast to these prior studies focused on the role of VCP in proteotoxic stress, our data provide evidence that impairing this multifunctional AAA-ATPase in an AML context also targets another key cancer hallmark: genomic instability (*5, 37*).

Previous studies have determined that the yeast homolog of VCP - Cdc48 - and VCP play a key role in regulation of DNA damage tolerance and repair pathways (*38- 41*). VCP has been implicated in extracting proteins, such as trapped Ku70/80 rings and the CMG (Cdc45, MCM2-7, and GINS) replicative helicase from chromatin, to maintain genome stability (*42-47*). Here, we demonstrate that VCP inhibition plays a key upstream function in DNA repair in an AML context, through the impairment of the canonical DNA repair kinase ATM. Using mass spectrometry-based interactome analysis, we highlighted the broad role of VCP in AML as a key interactor at the crosstalk of many nuclear signaling cascades, including DNA repair, synthesis and replication.

Emerging evidence suggests that targeting non-oncogene addictions, such as stress response pathways (*5, 6*), represents a promising cancer therapy. Among these cancer cell vulnerabilities, targeting DNA damage tolerance and repair pathways has emerged as a valuable therapeutic avenue. Indeed, the success of Poly(ADP-ribose) polymerase inhibitors in the treatment of cancers deficient for homologous recombination, such as *BRCA1-2* deficient ovarian and breast cancers, prompted researchers to develop and test new therapeutic strategies to target the DNA damage response (DDR) in cancer (*48*). In AML, despite the fact that germ-line mutations in DDR genes are very rare, recent reports demonstrate that defective DDR can result from replication and oxidative stress, gene polymorphisms and transcriptional deregulation of key DDR players (*49, 50*). For example, mutations in *IDH1* have been reported to downregulate the DNA damage sensor ATM by altering histone methylation, leading to impaired DNA repair and increased sensitivity to DNA damage (*51*). Recent studies established that pharmacological inhibition of the two serine/threonine kinases ATR and ATM represent potential therapeutic strategies for the treatment of AML, especially MLL-driven leukemias (*52*). Our own results, using genetic and pharmacological tools in primary AML patient samples and cell lines, and in syngeneic and xenografted AML mouse models, uncovered a strong dependency of AML on the nuclear function of the AAA-ATPase VCP through its regulation of ATM kinase signaling and subsequent DNA repair. VCP inhibition thus represents another approach to inhibiting DNA damage repair in AML. Although complete *Vcp* knockout (KO) is embryonic lethal in mice (*53*), *Vcp* heterozygous KO is notably viable and no specific dysfunctional phenotype has been reported (*53*), suggesting a dosage effect, and offering a therapeutic window for the selective targeting of cancer cells particularly addicted to VCP-driven cellular processes. Given the heightened sensitivity of AML cells to VCP inhibition, we hypothesize that impairment of DNA repair through VCP inhibition could offer a therapeutic window to selectively target AML cells while sparing normal tissues. In line with this hypothesis, CB-5083 and CB-5339 treatments did not markedly alter normal peripheral blood counts and weight curves in C57/BL6 mice. Accordingly, CB-5083 was not myelosuppressive in the recently conducted phase I clinical trial (NCT02243917).

The rewiring of DNA repair pathways by cancer cells plays an important role both in disease progression and response to chemotherapy (*49*). On one hand, the impairment of DDR can be beneficial to cancer cells in the initial steps of tumorigenesis and in tumor evolution, leading to the DNA DSBs responsible for genomic rearrangements and accumulation of somatic driver and passenger mutations (*54*). On the other hand, these features can be detrimental to cancer cells exposed to chemotherapeutic drugs, which interfere with DNA replication and cause DNA damage themselves, and render cells vulnerable to damage as they progress through the S-phase of the cell cycle (*55, 56*). Compromised DDR can thus both promote cancer development and influence cancer cell response to chemotherapy. While the molecular basis of the DNA damage and DNA repair coordination that enables a tolerable mutational burden in cancer cells is only partially understood, DNA-damaging agents, such as chemotherapy or radiation, are widely used in the clinic and tend to exploit the inability of cancer cells to correctly repair DNA. DDR upregulation can provide cancer cells with escape mechanisms and explain the chemotherapy resistance of some cancer subtypes. For instance, high expression of the DNA replication checkpoint gene *CHEK1* in AML cells was associated with an increased risk of relapse and poor survival in a cohort of patients with AML who had received first-line cytarabine and anthracycline chemotherapy (*57*). Thus, the combination of standard AML chemotherapy with inhibitors of DNA damage repair, such as VCP inhibitors, is a therapeutic strategy of interest. Our data suggests that targeting the DNA damage response through VCP inhibition might also sensitize AML cells to DNA damaging agents, such as anthracyclines and cytarabine, currently used as frontline therapy in AML (*58*). Such a synergistic combination strategy should thus simultaneously help to avoid compensatory pathways activated in response to either chemotherapy regimens alone or single agent VCP inhibitors. Additionally, a better understanding of the role of VCP in DDR may implicate synthetic lethal mechanisms in diverse cancers dependent on specific DDR defects.

To more effectively target cancer cells vulnerability to DNA damage, one of the major current translational challenges is the identification of biomarkers predicting response to DNA repair pathway-targeted cancer therapy. Our data demonstrated that the sensitivity to VCP inhibitors varies across and within a tumor type. In our study, we did not identify any specific mutational susceptibility to VCP impairment, suggesting that VCP dependency relies on a broader DDR-mediated vulnerability. However, we did observe a strong correlation of co-occuring *RAS* and *TP53* mutations with resistance to VCP inhibition. RAS/MAPK pathway mutations leading to an oncogenic proliferative signal are frequently observed in myeloid neoplasms. These activating mutations induce oncogenic replicative stress and can result in DDR pathways activation and modulation (*59-61*). For example, it has been recently reported that *KRAS* mutated leukemic cells rely on the error prone alt-NHEJ pathway to repair their DNA and present a delayed DSB resolution (*62*). *TP53* inactivating mutations are mainly reported in secondary myeloid malignancies and result in delayed DNA DSB resolution and a better DNA damage tolerability (*63*). Oncogenic RAS activates a TP53 dependent DNA damage response and checkpoints resulting in cellular senescence (*64*). *TP53* deficiency could thus cooperate with RAS through overcoming TP53 mediated senescence in order to promote tumorigenesis (*65, 66*). Taken together, this data suggests that such a double mutated context results in a modulated DDR and a better DNA damage tolerability potentially explaining resistance to VCP inhibition. Association of both *TP53* and *RAS* mutations is only described in a small number of patients with AML (0.6 to 3.1%) (*66*) suggesting that a large majority of patients with AML may benefit from VCP inhibition. Our findings could thus inform future VCP inhibitor clinical trials by excluding patients harboring both *TP53* and *RAS* pathway mutations.

Translating preclinical studies into the clinic is challenging and relies on the ability to develop tractable drug candidates (*67*). Many small molecule inhibitors have been reported to target the AAA-ATPase VCP (*20, 21, 68-70*). Among these, the most selective reported to date are two mechanistically divergent small molecules: NMS-873 and CB-5083. NMS-873 is a highly selective allosteric inhibitor that lacks appropriate pharmacological and bioavailability properties and thus is not expected to move forward into clinical trials (*22*). CB-5083 is an ATP-competitive, highly selective VCP inhibitor that has been recently tested into a phase I clinical trial in solid tumors, based on promising preclinical data (*21*) (NCT02243917). This small molecule's drug development journey was unfortunately curtailed by an unanticipated off-target ophthalmological toxicity. A comprehensive set of biochemical studies pointed to a PDE6 inhibitory off-target action as responsible for this side effect. Strongly encouraged by our preclinical data in AML, a second-generation VCP inhibitor, CB-5339, was characterized for advancement into clinical studies. We report here the structure and biochemical properties of CB-5339, the lead drug candidate for future clinical trials. Beyond the dissection of the PDE6 off-target effect, CB-5339 drug development will also benefit from the lessons learned from the CB-5083 previous phase I trial. The current study offers an opportunity to repurpose this unique class of VCP inhibitors, potentially at a lower dose, for AML, a disease highly dependent on VCP and with a strong unmet clinical need. Moreover, future studies will evaluate CB-

5339's therapeutic potential in solid tumors and neurodegenerative disorders where VCP represents a promising therapeutic target (*36, 71*).

Limitations of our study include a potentially narrow therapeutic window given the essential and ubiquitous role of VCP in various biological processes. Careful pharmacokinetic and pharmacodynamic studies will be needed to account for interindividual variability and ensure exposure to an effective and non-toxic dose of CB-5339. Additionaly, redundance in the DNA repair pathways may be responsible for resistance mechanisms that will need to be carefully monitored and mechanistically dissected during future clinical trials.

In conclusion, we identified and validated VCP as a therapeutic target in AML using multiple *in vivo* and *in vitro* models. Dissecting the molecular mechanisms underpinning this dependency in AML led us to the identification of a nuclear DNA repair function of VCP in leukemia, thereby providing a therapeutic avenue for AML. Our findings thus provide the preclinical and physiopathological basis for the CB-5339 AML phase I clinical trial as a single agent and in combination with standard of care AML chemotherapy regimens.

MATERIALS AND METHODS

Experimental design

This study sought to identify stress-related AML dependencies and validate the use of a second-generation clinical candidate VCP inhibitor as a targeted therapy in AML. An *in vivo* pooled shRNA screen pointed to the ATPase VCP as an exquisite dependency in AML. Biochemical and functional studies, in murine models, human AML cell lines, and primary patient AML samples, using genetic and chemical tools, were developed to validate the critical role of this ATPase in leukemia. A mass spectrometry-based analysis of the VCP interactome, combined with phospho-signaling studies revealed the essential role of VCP's involvement in DNA replication, damage recognition and repair pathways for leukemic cells survival. To further translate these results to the clinic, a selective ATP-competitive VCP inhibitor was identified. Effects of firstgeneration (CB-5083) and second-generation (CB-5339) VCP inhibitors in AML were studied *in vitro* in AML cell lines and primary patient AML samples and *in vivo* in human cell line or patient-derived orthotopic xenograft and syngeneic mouse models. Sample size was chosen in light of the fact that these *in vivo* models were historically highly penetrant, aggressive, and consistent. Blinded observers visually inspected mice for obvious signs of illness, such as loss of appetite, hunched posture, and lethargy. Mice were randomly assigned to each treatment group. The number of experimental replicates is specified in each figure legend.

Statistical analysis

Statistical analysis was performed using PRISM 8.0.1 (GraphPad), or the indicated software for more dedicated analysis. Data were analyzed using a nonparametric Mann-Whitney test (with the assumption of no Gaussian distribution of the group) unless otherwise specified, and the threshold of significance (α) was always set at 0.05.

SUPPLEMENTARY MATERIALS LIST

Materials and Methods

Fig. S1. MLL-AF9 AML disease burden evolution after VCP knock-down.

Fig. S2. CB-5083 tolerability profile.

Fig. S3. VCP inhibition does not primarily impair AML cell growth through induction of proteotoxic/ER stress.

Fig. S4. Comparative proteomic analysis identifies VCP-interacting proteins in an AML context.

Fig. S5. CB-5339 impairs DNA repair and induces proteotoxic stress in AML.

Fig. S6. CB-5339 pharmacokinetic properties, tolerability profile and post-treatment relapse characteristics.

Table S1. List of the top depleted genes identified by the *in vivo* shRNA screening.

Table S2. CB-5083 sensitivity profile across 131 cancer cell lines.

Table S3. Patient characteristics.

Table S4. List of VCP-interacting partners identified by mass spectrometry-based interactome analysis in the MV4-11 AML cell line.

Table S5. List of enriched pathways among VCP interactome.

Table S6. List of VCP-interacting partners identified in the MV4-11 AML cell line compared to HEK-293T cells.

Table S7. RAS and *TP53* mutational profiles of AML cell lines according to the CCLE database.

Table S8. Mutational and functional co-occurrence of RAS activation and TP53 deficiency in pan-cancer TCGA cohorts.

References (72 – 87)

REFERENCES

- 1. R. M. Stone, S. J. Mandrekar, B. L. Sanford, K. Laumann, S. Geyer, C. D. Bloomfield, C. Thiede, T. W. Prior, K. Dohner, G. Marcucci, F. Lo-Coco, R. B. Klisovic, A. Wei, J. Sierra, M. A. Sanz, J. M. Brandwein, T. de Witte, D. Niederwieser, F. R. Appelbaum, B. C. Medeiros, M. S. Tallman, J. Krauter, R. F. Schlenk, A. Ganser, H. Serve, G. Ehninger, S. Amadori, R. A. Larson, H. Dohner, Midostaurin plus Chemotherapy for Acute Myeloid Leukemia with a FLT3 Mutation. *N Engl J Med* **377**, 454-464 (2017); published online EpubAug 3 (10.1056/NEJMoa1614359).
- 2. C. D. DiNardo, E. M. Stein, S. de Botton, G. J. Roboz, J. K. Altman, A. S. Mims, R. Swords, R. H. Collins, G. N. Mannis, D. A. Pollyea, W. Donnellan, A. T. Fathi, A. Pigneux, H. P. Erba, G. T. Prince, A. S. Stein, G. L. Uy, J. M. Foran, E. Traer, R. K. Stuart, M. L. Arellano, J. L. Slack, M. A. Sekeres, C. Willekens, S. Choe, H. Wang, V. Zhang, K. E. Yen, S. M. Kapsalis, H. Yang, D. Dai, B. Fan, M. Goldwasser, H. Liu, S. Agresta, B. Wu, E. C. Attar, M. S. Tallman, R. M. Stone, H. M. Kantarjian, Durable Remissions with Ivosidenib in IDH1-Mutated Relapsed or Refractory AML. *N Engl J Med* **378**, 2386-2398 (2018); published online EpubJun 21 (10.1056/NEJMoa1716984).
- 3. E. M. Stein, C. D. DiNardo, D. A. Pollyea, A. T. Fathi, G. J. Roboz, J. K. Altman, R. M. Stone, D. J. DeAngelo, R. L. Levine, I. W. Flinn, H. M. Kantarijan, R. Collins, M. R. Patel, A. E. Frankel, A. Stein, M. A. Sekeres, R. T. Swords, B. C. Medeiros, C. Willekens, P. Vyas, A. Tosolini, Q. Xu, R. D. Knight, K. E. Yen, S. Agresta, S. de Botton, M. S. Tallman, Enasidenib in mutant IDH2 relapsed or refractory acute myeloid leukemia. *Blood* **130**, 722- 731 (2017); published online EpubAug 10 (10.1182/blood-2017-04-779405).
- 4. L. M. Ellis, D. J. Hicklin, Resistance to Targeted Therapies: Refining Anticancer Therapy in the Era of Molecular Oncology. *Clin Cancer Res* **15**, 7471-7478 (2009); published online EpubDec 15 (10.1158/1078-0432.CCR-09-1070).
- 5. J. Luo, N. L. Solimini, S. J. Elledge, Principles of cancer therapy: oncogene and non-oncogene addiction. *Cell* **136**, 823-837 (2009); published online EpubMar 06 (10.1016/j.cell.2009.02.024).
- 6. R. Nagel, E. A. Semenova, A. Berns, Drugging the addict: non-oncogene addiction as a target for cancer therapy. *EMBO Rep* **17**, 1516-1531 (2016); published online EpubNov (10.15252/embr.201643030).
- 7. J. Zuber, J. Shi, E. Wang, A. R. Rappaport, H. Herrmann, E. A. Sison, D. Magoon, J. Qi, K. Blatt, M. Wunderlich, M. J. Taylor, C. Johns, A. Chicas, J. C. Mulloy, S. C. Kogan, P. Brown, P. Valent, J. E. Bradner, S. W. Lowe, C. R. Vakoc, RNAi screen identifies Brd4 as a therapeutic target in acute myeloid leukaemia. *Nature* **478**, 524-528 (2011); published online EpubAug 3 (10.1038/nature10334).
- 8. M. Greaves, Evolutionary determinants of cancer. *Cancer Discov* **5**, 806-820 (2015); published online EpubAug (10.1158/2159-8290.CD-15-0439).
- 9. E. D. Lagadinou, A. Sach, K. Callahan, R. M. Rossi, S. J. Neering, M. Minhajuddin, J. M. Ashton, S. Pei, V. Grose, K. M. O'Dwyer, J. L. Liesveld, P. S. Brookes, M. W. Becker, C. T. Jordan, BCL-2 inhibition targets oxidative phosphorylation and selectively eradicates quiescent human leukemia stem cells. *Cell Stem Cell* **12**, 329-341 (2013); published online EpubMar 7 (10.1016/j.stem.2012.12.013).
- 10. C. D. DiNardo, C. R. Rausch, C. Benton, T. Kadia, N. Jain, N. Pemmaraju, N. Daver, W. Covert, K. R. Marx, M. Mace, E. Jabbour, J. Cortes, G. Garcia-Manero, F. Ravandi, K. N. Bhalla, H. Kantarjian, M. Konopleva, Clinical Experience with the BCL2-inhibitor Venetoclax in Combination Therapy for Relapsed and Refractory Acute Myeloid Leukemia and Related Myeloid Malignancies. *Am J Hematol*, (2017); published online EpubDec 8 (10.1002/ajh.25000).
- 11. M. Konopleva, D. A. Pollyea, J. Potluri, B. Chyla, L. Hogdal, T. Busman, E. McKeegan, A. H. Salem, M. Zhu, J. L. Ricker, W. Blum, C. D. DiNardo, T. Kadia, M. Dunbar, R. Kirby, N. Falotico, J. Leverson, R. Humerickhouse, M. Mabry, R. Stone, H. Kantarjian, A. Letai, Efficacy and Biological Correlates of Response in a Phase II Study of Venetoclax Monotherapy in Patients with Acute Myelogenous Leukemia. *Cancer Discov* **6**, 1106-1117 (2016); published online EpubOct (10.1158/2159-8290.CD-16-0313).
- 12. D. A. Pollyea, B. M. Stevens, C. L. Jones, A. Winters, S. Pei, M. Minhajuddin, A. D'Alessandro, R. Culp-Hill, K. A. Riemondy, A. E. Gillen, J. R. Hesselberth, D. Abbott, D. Schatz, J. A. Gutman, E. Purev, C. Smith, C. T. Jordan, Venetoclax with azacitidine disrupts energy metabolism and targets leukemia stem cells in patients with acute myeloid leukemia. *Nat Med* **24**, 1859-1866 (2018); published online EpubDec (10.1038/s41591-018-0233-1).
- 13. C. D. DiNardo, K. Pratz, V. Pullarkat, B. A. Jonas, M. Arellano, P. S. Becker, O. Frankfurt, M. Konopleva, A. H. Wei, H. M. Kantarjian, T. Xu, W. J. Hong, B. Chyla, J. Potluri, D. A. Pollyea, A. Letai, Venetoclax combined with decitabine or azacitidine in treatment-naive, elderly patients with acute myeloid leukemia. *Blood* **133**, 7-17 (2019); published online EpubJan 3 (10.1182/blood-2018-08-868752).
- 14. A. Puissant, N. Fenouille, G. Alexe, Y. Pikman, C. F. Bassil, S. Mehta, J. Du, J. U. Kazi, F. Luciano, L. Ronnstrand, A. L. Kung, J. C. Aster, I. Galinsky, R. M. Stone, D. J. DeAngelo, M. T. Hemann, K. Stegmaier, SYK is a critical regulator of FLT3 in acute myeloid leukemia. *Cancer Cell* **25**, 226-242 (2014); published online EpubFeb 10 (10.1016/j.ccr.2014.01.022).
- 15. P. G. Miller, F. Al-Shahrour, K. A. Hartwell, L. P. Chu, M. Jaras, R. V. Puram, A. Puissant, K. P. Callahan, J. Ashton, M. E. McConkey, L. P. Poveromo, G. S. Cowley, M. G. Kharas, M. Labelle, S. Shterental, J. Fujisaki, L. Silberstein, G. Alexe, M. A. Al-Hajj, C. A. Shelton, S. A. Armstrong, D. E. Root, D. T. Scadden, R. O. Hynes, S. Mukherjee, K. Stegmaier, C. T. Jordan, B. L. Ebert, In Vivo RNAi screening identifies a leukemia-specific dependence on integrin beta 3 signaling. *Cancer Cell* **24**, 45-58 (2013); published online EpubJul 8 (10.1016/j.ccr.2013.05.004).
- 16. V. Stambolic, A. Suzuki, J. L. de la Pompa, G. M. Brothers, C. Mirtsos, T. Sasaki, J. Ruland, J. M. Penninger, D. P. Siderovski, T. W. Mak, Negative regulation of PKB/Akt-dependent cell survival by the tumor suppressor PTEN. *Cell* **95**, 29-39 (1998); published online EpubOct 2 (
- 17. H. Xie, J. Hanai, J. G. Ren, L. Kats, K. Burgess, P. Bhargava, S. Signoretti, J. Billiard, K. J. Duffy, A. Grant, X. Wang, P. K. Lorkiewicz, S. Schatzman, M. Bousamra, 2nd, A. N. Lane, R. M. Higashi, T. W. Fan, P. P. Pandolfi, V. P. Sukhatme, P. Seth, Targeting lactate dehydrogenase--a inhibits tumorigenesis and tumor progression in mouse models of lung cancer and impacts tumorinitiating cells. *Cell Metab* **19**, 795-809 (2014); published online EpubMay 06 (10.1016/j.cmet.2014.03.003).
- 18. Q. Wang, C. Song, C. C. Li, Hexamerization of p97-VCP is promoted by ATP binding to the D1 domain and required for ATPase and biological activities. *Biochem Biophys Res Commun* **300**, 253-260 (2003); published online EpubJan 10 (
- 19. S. Dalal, M. F. Rosser, D. M. Cyr, P. I. Hanson, Distinct roles for the AAA ATPases NSF and p97 in the secretory pathway. *Mol Biol Cell* **15**, 637-648 (2004); published online EpubFeb (10.1091/mbc.E03-02-0097).
- 20. D. J. Anderson, R. Le Moigne, S. Djakovic, B. Kumar, J. Rice, S. Wong, J. Wang, B. Yao, E. Valle, S. Kiss von Soly, A. Madriaga, F. Soriano, M. K. Menon, Z. Y. Wu, M. Kampmann, Y. Chen, J. S. Weissman, B. T. Aftab, F. M. Yakes, L. Shawver, H. J. Zhou, D. Wustrow, M. Rolfe, Targeting the AAA ATPase p97 as an Approach to Treat Cancer through Disruption of Protein Homeostasis. *Cancer Cell* **28**, 653-665 (2015); published online EpubNov 09 (10.1016/j.ccell.2015.10.002).
- 21. H. J. Zhou, J. Wang, B. Yao, S. Wong, S. Djakovic, B. Kumar, J. Rice, E. Valle, F. Soriano, M. K. Menon, A. Madriaga, S. Kiss von Soly, A. Kumar, F. Parlati, F. M. Yakes, L. Shawver, R. Le Moigne, D. J. Anderson, M. Rolfe, D. Wustrow, Discovery of a First-in-Class, Potent, Selective, and Orally Bioavailable Inhibitor of the p97 AAA ATPase (CB-5083). *J Med Chem* **58**, 9480-9497 (2015); published online EpubDec 24 (10.1021/acs.jmedchem.5b01346).
- 22. P. Magnaghi, R. D'Alessio, B. Valsasina, N. Avanzi, S. Rizzi, D. Asa, F. Gasparri, L. Cozzi, U. Cucchi, C. Orrenius, P. Polucci, D. Ballinari, C. Perrera, A. Leone, G. Cervi, E. Casale, Y. Xiao, C. Wong, D. J. Anderson, A. Galvani, D. Donati, T. O'Brien, P. K. Jackson, A. Isacchi, Covalent and allosteric inhibitors of the ATPase VCP/p97 induce cancer cell death. *Nat Chem Biol* **9**, 548-556 (2013); published online EpubSep (10.1038/nchembio.1313).
- 23. N. G. Her, J. I. Toth, C. T. Ma, Y. Wei, K. Motamedchaboki, E. Sergienko, M. D. Petroski, p97 Composition Changes Caused by Allosteric Inhibition Are Suppressed by an On-Target Mechanism that Increases the Enzyme's ATPase Activity. *Cell Chem Biol* **23**, 517-528 (2016); published online EpubApr 21 (10.1016/j.chembiol.2016.03.012).
- 24. C. Wojcik, M. Rowicka, A. Kudlicki, D. Nowis, E. McConnell, M. Kujawa, G. N. DeMartino, Valosin-containing protein (p97) is a regulator of endoplasmic reticulum stress and of the degradation of N-end rule and ubiquitin-fusion degradation pathway substrates in mammalian cells. *Mol Biol Cell* **17**, 4606- 4618 (2006); published online EpubNov (10.1091/mbc.E06-05-0432).
- 25. R. M. Dai, C. C. Li, Valosin-containing protein is a multi-ubiquitin chaintargeting factor required in ubiquitin-proteasome degradation. *Nat Cell Biol* **3**, 740-744 (2001); published online EpubAug (10.1038/35087056).
- 26. M. Raman, M. Sergeev, M. Garnaas, J. R. Lydeard, E. L. Huttlin, W. Goessling, J. V. Shah, J. W. Harper, Systematic proteomics of the VCP-UBXD adaptor network identifies a role for UBXN10 in regulating ciliogenesis. *Nat Cell Biol* **17**, 1356-1369 (2015); published online EpubOct (10.1038/ncb3238).
- 27. Y. Shiloh, ATM and related protein kinases: safeguarding genome integrity. *Nat Rev Cancer* **3**, 155-168 (2003); published online EpubMar (10.1038/nrc1011).
- 28. Y. Shiloh, Y. Ziv, The ATM protein kinase: regulating the cellular response to genotoxic stress, and more. *Nat Rev Mol Cell Biol* **14**, 197-210 (2013); published online EpubApr (
- 29. V. Y. Arshavsky, T. D. Lamb, E. N. Pugh, Jr., G proteins and phototransduction. *Annu Rev Physiol* **64**, 153-187 (2002)10.1146/annurev.physiol.64.082701.102229).
- 30. K. E. Andersson, PDE5 inhibitors pharmacology and clinical applications 20 years after sildenafil discovery. *Br J Pharmacol* **175**, 2554-2565 (2018); published online EpubJul (10.1111/bph.14205).
- 31. J. Barretina, G. Caponigro, N. Stransky, K. Venkatesan, A. A. Margolin, S. Kim, C. J. Wilson, J. Lehar, G. V. Kryukov, D. Sonkin, A. Reddy, M. Liu, L. Murray, M. F. Berger, J. E. Monahan, P. Morais, J. Meltzer, A. Korejwa, J. Jane-Valbuena, F. A. Mapa, J. Thibault, E. Bric-Furlong, P. Raman, A. Shipway, I. H. Engels, J. Cheng, G. K. Yu, J. Yu, P. Aspesi, Jr., M. de Silva, K. Jagtap, M. D. Jones, L. Wang, C. Hatton, E. Palescandolo, S. Gupta, S. Mahan, C. Sougnez, R. C. Onofrio, T. Liefeld, L. MacConaill, W. Winckler, M. Reich, N. Li, J. P. Mesirov, S. B. Gabriel, G. Getz, K. Ardlie, V. Chan, V. E. Myer, B. L. Weber, J. Porter, M. Warmuth, P. Finan, J. L. Harris, M. Meyerson, T. R. Golub, M. P. Morrissey, W. R. Sellers, R. Schlegel, L. A. Garraway, The Cancer Cell Line Encyclopedia enables predictive modelling of anticancer drug sensitivity. *Nature* **483**, 603-607 (2012); published online EpubMar 28 (10.1038/nature11003).
- 32. C. Cancer Cell Line Encyclopedia, C. Genomics of Drug Sensitivity in Cancer, Pharmacogenomic agreement between two cancer cell line data sets. *Nature* **528**, 84-87 (2015); published online EpubDec 3 (10.1038/nature15736).
- 33. M. H. Bailey, C. Tokheim, E. Porta-Pardo, S. Sengupta, D. Bertrand, A. Weerasinghe, A. Colaprico, M. C. Wendl, J. Kim, B. Reardon, P. K. Ng, K. J. Jeong, S. Cao, Z. Wang, J. Gao, Q. Gao, F. Wang, E. M. Liu, L. Mularoni, C. Rubio-Perez, N. Nagarajan, I. Cortes-Ciriano, D. C. Zhou, W. W. Liang, J. M. Hess, V. D. Yellapantula, D. Tamborero, A. Gonzalez-Perez, C. Suphavilai, J. Y. Ko, E. Khurana, P. J. Park, E. M. Van Allen, H. Liang, M. C. W. Group, N. Cancer Genome Atlas Research, M. S. Lawrence, A. Godzik, N. Lopez-Bigas, J. Stuart, D. Wheeler, G. Getz, K. Chen, A. J. Lazar, G. B. Mills, R. Karchin, L. Ding, Comprehensive Characterization of Cancer Driver Genes and Mutations. *Cell* **173**, 371-385 e318 (2018); published online EpubApr 5 (10.1016/j.cell.2018.02.060).
- 34. T. A. Knijnenburg, L. Wang, M. T. Zimmermann, N. Chambwe, G. F. Gao, A. D. Cherniack, H. Fan, H. Shen, G. P. Way, C. S. Greene, Y. Liu, R. Akbani, B. Feng, L. A. Donehower, C. Miller, Y. Shen, M. Karimi, H. Chen, P. Kim, P. Jia, E. Shinbrot, S. Zhang, J. Liu, H. Hu, M. H. Bailey, C. Yau, D. Wolf, Z. Zhao, J. N. Weinstein, L. Li, L. Ding, G. B. Mills, P. W. Laird, D. A. Wheeler, I. Shmulevich, N. Cancer Genome Atlas Research, R. J. Monnat, Jr., Y. Xiao, C. Wang, Genomic and Molecular Landscape of DNA Damage Repair Deficiency across The Cancer Genome Atlas. *Cell Rep* **23**, 239-254 e236 (2018); published online EpubApr 3 (10.1016/j.celrep.2018.03.076).
- 35. G. P. Way, F. Sanchez-Vega, K. La, J. Armenia, W. K. Chatila, A. Luna, C. Sander, A. D. Cherniack, M. Mina, G. Ciriello, N. Schultz, N. Cancer Genome Atlas Research, Y. Sanchez, C. S. Greene, Machine Learning Detects Pancancer Ras Pathway Activation in The Cancer Genome Atlas. *Cell Rep* **23**, 172- 180 e173 (2018); published online EpubApr 3 (10.1016/j.celrep.2018.03.046).
- 36. R. Le Moigne, B. T. Aftab, S. Djakovic, E. Dhimolea, E. Valle, M. Murnane, E. M. King, F. Soriano, M. K. Menon, Z. Y. Wu, S. T. Wong, G. J. Lee, B. Yao, A. P. Wiita, C. Lam, J. Rice, J. Wang, M. Chesi, P. L. Bergsagel, M. Kraus, C.

Driessen, S. Kiss von Soly, F. M. Yakes, D. Wustrow, L. Shawver, H. J. Zhou, T. G. Martin, 3rd, J. L. Wolf, C. S. Mitsiades, D. J. Anderson, M. Rolfe, The p97 Inhibitor CB-5083 Is a Unique Disrupter of Protein Homeostasis in Models of Multiple Myeloma. *Mol Cancer Ther* **16**, 2375-2386 (2017); published online EpubNov (10.1158/1535-7163.MCT-17-0233).

- 37. S. Negrini, V. G. Gorgoulis, T. D. Halazonetis, Genomic instability--an evolving hallmark of cancer. *Nat Rev Mol Cell Biol* **11**, 220-228 (2010); published online EpubMar (10.1038/nrm2858).
- 38. N. Jiang, Y. Shen, X. Fei, K. Sheng, P. Sun, Y. Qiu, J. Larner, L. Cao, X. Kong, J. Mi, Valosin-containing protein regulates the proteasome-mediated degradation of DNA-PKcs in glioma cells. *Cell Death Dis* **4**, e647 (2013); published online EpubMay 30 (10.1038/cddis.2013.171).
- 39. I. Gibbs-Seymour, Y. Oka, E. Rajendra, B. T. Weinert, L. A. Passmore, K. J. Patel, J. V. Olsen, C. Choudhary, S. Bekker-Jensen, N. Mailand, Ubiquitin-SUMO circuitry controls activated fanconi anemia ID complex dosage in response to DNA damage. *Mol Cell* **57**, 150-164 (2015); published online EpubJan 8 (10.1016/j.molcel.2014.12.001).
- 40. J. He, Q. Zhu, G. Wani, N. Sharma, C. Han, J. Qian, K. Pentz, Q. E. Wang, A. A. Wani, Ubiquitin-specific protease 7 regulates nucleotide excision repair through deubiquitinating XPC protein and preventing XPC protein from undergoing ultraviolet light-induced and VCP/p97 protein-regulated proteolysis. *J Biol Chem* **289**, 27278-27289 (2014); published online EpubSep 26 (10.1074/jbc.M114.589812).
- 41. A. Franz, L. Ackermann, T. Hoppe, Ring of Change: CDC48/p97 Drives Protein Dynamics at Chromatin. *Front Genet* **7**, 73 (2016)10.3389/fgene.2016.00073).
- 42. B. Vaz, S. Halder, K. Ramadan, Role of p97/VCP (Cdc48) in genome stability. *Front Genet* **4**, 60 (2013)10.3389/fgene.2013.00060).
- 43. S. Bergink, T. Ammon, M. Kern, L. Schermelleh, H. Leonhardt, S. Jentsch, Role of Cdc48/p97 as a SUMO-targeted segregase curbing Rad51-Rad52 interaction. *Nat Cell Biol* **15**, 526-532 (2013); published online EpubMay (10.1038/ncb2729).
- 44. K. Acs, M. S. Luijsterburg, L. Ackermann, F. A. Salomons, T. Hoppe, N. P. Dantuma, The AAA-ATPase VCP/p97 promotes 53BP1 recruitment by removing L3MBTL1 from DNA double-strand breaks. *Nat Struct Mol Biol* **18**, 1345-1350 (2011); published online EpubNov 27 (10.1038/nsmb.2188).
- 45. J. van den Boom, M. Wolf, L. Weimann, N. Schulze, F. Li, F. Kaschani, A. Riemer, C. Zierhut, M. Kaiser, G. Iliakis, H. Funabiki, H. Meyer, VCP/p97 Extracts Sterically Trapped Ku70/80 Rings from DNA in Double-Strand Break Repair. *Mol Cell* **64**, 189-198 (2016); published online EpubOct 06 (10.1016/j.molcel.2016.08.037).
- 46. E. J. Davis, C. Lachaud, P. Appleton, T. J. Macartney, I. Nathke, J. Rouse, DVC1 (C1orf124) recruits the p97 protein segregase to sites of DNA damage. *Nat Struct Mol Biol* **19**, 1093-1100 (2012); published online EpubNov (10.1038/nsmb.2394).
- 47. M. Maric, T. Maculins, G. De Piccoli, K. Labib, Cdc48 and a ubiquitin ligase drive disassembly of the CMG helicase at the end of DNA replication. *Science* **346**, 1253596 (2014); published online EpubOct 24 (10.1126/science.1253596).
- 48. P. C. Fong, D. S. Boss, T. A. Yap, A. Tutt, P. Wu, M. Mergui-Roelvink, P. Mortimer, H. Swaisland, A. Lau, M. J. O'Connor, A. Ashworth, J. Carmichael, S. B. Kaye, J. H. Schellens, J. S. de Bono, Inhibition of poly(ADP-ribose) polymerase in tumors from BRCA mutation carriers. *N Engl J Med* **361**, 123- 134 (2009); published online EpubJul 9 (10.1056/NEJMoa0900212).
- 49. M. T. Esposito, C. W. So, DNA damage accumulation and repair defects in acute myeloid leukemia: implications for pathogenesis, disease progression, and chemotherapy resistance. *Chromosoma* **123**, 545-561 (2014); published online EpubDec (10.1007/s00412-014-0482-9).
- 50. M. T. Esposito, L. Zhao, T. K. Fung, J. K. Rane, A. Wilson, N. Martin, J. Gil, A. Y. Leung, A. Ashworth, C. W. So, Synthetic lethal targeting of oncogenic transcription factors in acute leukemia by PARP inhibitors. *Nat Med* **21**, 1481- 1490 (2015); published online EpubDec (10.1038/nm.3993).
- 51. S. Inoue, W. Y. Li, A. Tseng, I. Beerman, A. J. Elia, S. C. Bendall, F. Lemonnier, K. J. Kron, D. W. Cescon, Z. Hao, E. F. Lind, N. Takayama, A. C. Planello, S. Y. Shen, A. H. Shih, D. M. Larsen, Q. Li, B. E. Snow, A. Wakeham, J. Haight, C. Gorrini, C. Bassi, K. L. Thu, K. Murakami, A. R. Elford, T. Ueda, K. Straley, K. E. Yen, G. Melino, L. Cimmino, I. Aifantis, R. L. Levine, D. D. De Carvalho, M. Lupien, D. J. Rossi, G. P. Nolan, R. A. Cairns, T. W. Mak, Mutant IDH1 Downregulates ATM and Alters DNA Repair and Sensitivity to DNA Damage Independent of TET2. *Cancer Cell* **30**, 337-348 (2016); published online EpubAug 8 (10.1016/j.ccell.2016.05.018).
- 52. I. Morgado-Palacin, A. Day, M. Murga, V. Lafarga, M. E. Anton, A. Tubbs, H. T. Chen, A. Ergan, R. Anderson, A. Bhandoola, K. G. Pike, B. Barlaam, E. Cadogan, X. Wang, A. J. Pierce, C. Hubbard, S. A. Armstrong, A. Nussenzweig, O. Fernandez-Capetillo, Targeting the kinase activities of ATR and ATM exhibits antitumoral activity in mouse models of MLL-rearranged AML. *Sci Signal* **9**, ra91 (2016); published online EpubSep 13 (10.1126/scisignal.aad8243).
- 53. J. M. Muller, K. Deinhardt, I. Rosewell, G. Warren, D. T. Shima, Targeted deletion of p97 (VCP/CDC48) in mouse results in early embryonic lethality. *Biochem Biophys Res Commun* **354**, 459-465 (2007); published online EpubMar 9 (10.1016/j.bbrc.2006.12.206).
- 54. J. Libura, D. J. Slater, C. A. Felix, C. Richardson, Therapy-related acute myeloid leukemia-like MLL rearrangements are induced by etoposide in primary human CD34+ cells and remain stable after clonal expansion. *Blood* **105**, 2124-2131 (2005); published online EpubMar 1 (10.1182/blood-2004-07- 2683).
- 55. N. J. Curtin, DNA repair dysregulation from cancer driver to therapeutic target. *Nat Rev Cancer* **12**, 801-817 (2012); published online EpubDec (10.1038/nrc3399).
- 56. M. Dobbelstein, C. S. Sorensen, Exploiting replicative stress to treat cancer. *Nat Rev Drug Discov* **14**, 405-423 (2015); published online EpubJun (10.1038/nrd4553).
- 57. L. David, A. Fernandez-Vidal, S. Bertoli, S. Grgurevic, B. Lepage, D. Deshaies, N. Prade, M. Cartel, C. Larrue, J. E. Sarry, E. Delabesse, C. Cazaux, C. Didier, C. Recher, S. Manenti, J. S. Hoffmann, CHK1 as a therapeutic target to bypass chemoresistance in AML. *Sci Signal* **9**, ra90 (2016); published online EpubSep 13 (10.1126/scisignal.aac9704).
- 58. M. Kastan, Ataxia-telangiectasia--broad implications for a rare disorder. *N Engl J Med* **333**, 662-663 (1995); published online EpubSep (10.1056/NEJM199509073331014).
- 59. P. Kotsantis, E. Petermann, S. J. Boulton, Mechanisms of Oncogene-Induced Replication Stress: Jigsaw Falling into Place. *Cancer Discov* **8**, 537-555 (2018); published online EpubMay (10.1158/2159-8290.CD-17-1461).
- 60. E. Grabocka, Y. Pylayeva-Gupta, M. J. Jones, V. Lubkov, E. Yemanaberhan, L. Taylor, H. H. Jeng, D. Bar-Sagi, Wild-type H- and N-Ras promote mutant K-Ras-driven tumorigenesis by modulating the DNA damage response. *Cancer Cell* **25**, 243-256 (2014); published online EpubFeb 10 (10.1016/j.ccr.2014.01.005).
- 61. Z. Tu, K. M. Aird, B. G. Bitler, J. P. Nicodemus, N. Beeharry, B. Xia, T. J. Yen, R. Zhang, Oncogenic RAS regulates BRIP1 expression to induce dissociation of BRCA1 from chromatin, inhibit DNA repair, and promote senescence. *Dev Cell* **21**, 1077-1091 (2011); published online EpubDec 13 (10.1016/j.devcel.2011.10.010).
- 62. P. S. Hahnel, B. Enders, D. Sasca, W. P. Roos, B. Kaina, L. Bullinger, M. Theobald, T. Kindler, Targeting components of the alternative NHEJ pathway sensitizes KRAS mutant leukemic cells to chemotherapy. *Blood* **123**, 2355- 2366 (2014); published online EpubApr 10 (10.1182/blood-2013-01-477620).
- 63. M. A. Jacoby, R. E. De Jesus Pizarro, J. Shao, D. C. Koboldt, R. S. Fulton, G. Zhou, R. K. Wilson, M. J. Walter, The DNA double-strand break response is abnormal in myeloblasts from patients with therapy-related acute myeloid leukemia. *Leukemia* **28**, 1242-1251 (2014); published online EpubJun (10.1038/leu.2013.368).
- 64. G. Ferbeyre, E. de Stanchina, A. W. Lin, E. Querido, M. E. McCurrach, G. J. Hannon, S. W. Lowe, Oncogenic ras and p53 cooperate to induce cellular senescence. *Mol Cell Biol* **22**, 3497-3508 (2002); published online EpubMay (
- 65. M. Serrano, A. W. Lin, M. E. McCurrach, D. Beach, S. W. Lowe, Oncogenic ras provokes premature cell senescence associated with accumulation of p53 and p16INK4a. *Cell* **88**, 593-602 (1997); published online EpubMar 7 (
- 66. J. Zhang, G. Kong, A. Rajagopalan, L. Lu, J. Song, M. Hussaini, X. Zhang, E. A. Ranheim, Y. Liu, J. Wang, X. Gao, Y. I. Chang, K. D. Johnson, Y. Zhou, D. Yang, B. Bhatnagar, D. M. Lucas, E. H. Bresnick, X. Zhong, E. Padron, J. Zhang, p53-/- synergizes with enhanced NrasG12D signaling to transform megakaryocyte-erythroid progenitors in acute myeloid leukemia. *Blood* **129**, 358-370 (2017); published online EpubJan 19 (10.1182/blood-2016-06- 719237).
- 67. B. Munos, Lessons from 60 years of pharmaceutical innovation. *Nat Rev Drug Discov* **8**, 959-968 (2009); published online EpubDec (10.1038/nrd2961).
- 68. S. Banerjee, A. Bartesaghi, A. Merk, P. Rao, S. L. Bulfer, Y. Yan, N. Green, B. Mroczkowski, R. J. Neitz, P. Wipf, V. Falconieri, R. J. Deshaies, J. L. Milne, D. Huryn, M. Arkin, S. Subramaniam, 2.3 A resolution cryo-EM structure of human p97 and mechanism of allosteric inhibition. *Science* **351**, 871-875 (2016); published online EpubFeb 19 (10.1126/science.aad7974).
- 69. T. F. Chou, S. J. Brown, D. Minond, B. E. Nordin, K. Li, A. C. Jones, P. Chase, P. R. Porubsky, B. M. Stoltz, F. J. Schoenen, M. P. Patricelli, P. Hodder, H. Rosen, R. J. Deshaies, Reversible inhibitor of p97, DBeQ, impairs both ubiquitin-dependent and autophagic protein clearance pathways. *Proc Natl*

Acad Sci U S A **108**, 4834-4839 (2011); published online EpubMar 22 (10.1073/pnas.1015312108).

- 70. R. Pohler, J. H. Krahn, J. van den Boom, G. Dobrynin, F. Kaschani, H. M. Eggenweiler, F. T. Zenke, M. Kaiser, H. Meyer, A Non-Competitive Inhibitor of VCP/p97 and VPS4 Reveals Conserved Allosteric Circuits in Type I and II AAA ATPases. *Angew Chem Int Ed Engl* **57**, 1576-1580 (2018); published online EpubFeb 5 (10.1002/anie.201711429).
- 71. A. Kakizuka, Roles of VCP in human neurodegenerative disorders. *Biochem Soc Trans* **36**, 105-108 (2008); published online EpubFeb (10.1042/BST0360105).
- 72. Z. Dai, J. M. Sheridan, L. J. Gearing, D. L. Moore, S. Su, S. Wormald, S. Wilcox, L. O'Connor, R. A. Dickins, M. E. Blewitt, M. E. Ritchie, edgeR: a versatile tool for the analysis of shRNA-seq and CRISPR-Cas9 genetic screens. *F1000Res* **3**, 95 (2014)10.12688/f1000research.3928.2).
- 73. M. D. Robinson, D. J. McCarthy, G. K. Smyth, edgeR: a Bioconductor package for differential expression analysis of digital gene expression data. *Bioinformatics* **26**, 139-140 (2010); published online EpubJan 01 (10.1093/bioinformatics/btp616).
- 74. B. Luo, H. W. Cheung, A. Subramanian, T. Sharifnia, M. Okamoto, X. Yang, G. Hinkle, J. S. Boehm, R. Beroukhim, B. A. Weir, C. Mermel, D. A. Barbie, T. Awad, X. Zhou, T. Nguyen, B. Piqani, C. Li, T. R. Golub, M. Meyerson, N. Hacohen, W. C. Hahn, E. S. Lander, D. M. Sabatini, D. E. Root, Highly parallel identification of essential genes in cancer cells. *Proc Natl Acad Sci U S A* **105**, 20380-20385 (2008); published online EpubDec 23 (10.1073/pnas.0810485105).
- 75. C. Fellmann, T. Hoffmann, V. Sridhar, B. Hopfgartner, M. Muhar, M. Roth, D. Y. Lai, I. A. Barbosa, J. S. Kwon, Y. Guan, N. Sinha, J. Zuber, An optimized microRNA backbone for effective single-copy RNAi. *Cell Rep* **5**, 1704-1713 (2013); published online EpubDec 26 (10.1016/j.celrep.2013.11.020).
- 76. V. Banerji, S. M. Frumm, K. N. Ross, L. S. Li, A. C. Schinzel, C. K. Hahn, R. M. Kakoza, K. T. Chow, L. Ross, G. Alexe, N. Tolliday, H. Inguilizian, I. Galinsky, R. M. Stone, D. J. DeAngelo, G. Roti, J. C. Aster, W. C. Hahn, A. L. Kung, K. Stegmaier, The intersection of genetic and chemical genomic screens identifies GSK-3alpha as a target in human acute myeloid leukemia. *J Clin Invest* **122**, 935-947 (2012); published online EpubMar (10.1172/JCI46465).
- 77. J. Rappsilber, M. Mann, Y. Ishihama, Protocol for micro-purification, enrichment, pre-fractionation and storage of peptides for proteomics using StageTips. *Nat Protoc* **2**, 1896-1906 (2007)10.1038/nprot.2007.261).
- 78. N. D. Udeshi, D. R. Mani, T. Eisenhaure, P. Mertins, J. D. Jaffe, K. R. Clauser, N. Hacohen, S. A. Carr, Methods for quantification of in vivo changes in protein ubiquitination following proteasome and deubiquitinase inhibition. *Mol Cell Proteomics* **11**, 148-159 (2012); published online EpubMay (10.1074/mcp.M111.016857).
- 79. H. Wickham, *ggplot2: Elegant Graphics for Data Analysis.* . (Springer-Verlag New York., 2009).
- 80. A. Subramanian, P. Tamayo, V. K. Mootha, S. Mukherjee, B. L. Ebert, M. A. Gillette, A. Paulovich, S. L. Pomeroy, T. R. Golub, E. S. Lander, J. P. Mesirov, Gene set enrichment analysis: a knowledge-based approach for interpreting genome-wide expression profiles. *Proc Natl Acad Sci U S A* **102**, 15545-15550 (2005); published online EpubOct 25 (10.1073/pnas.0506580102).
- 81. E. Y. Chen, C. M. Tan, Y. Kou, Q. Duan, Z. Wang, G. V. Meirelles, N. R. Clark, A. Ma'ayan, Enrichr: interactive and collaborative HTML5 gene list enrichment analysis tool. *BMC Bioinformatics* **14**, 128 (2013); published online EpubApr 15 (10.1186/1471-2105-14-128).
- 82. M. V. Kuleshov, M. R. Jones, A. D. Rouillard, N. F. Fernandez, Q. Duan, Z. Wang, S. Koplev, S. L. Jenkins, K. M. Jagodnik, A. Lachmann, M. G. McDermott, C. D. Monteiro, G. W. Gundersen, A. Ma'ayan, Enrichr: a comprehensive gene set enrichment analysis web server 2016 update. *Nucleic Acids Res* **44**, W90-97 (2016); published online EpubJul 8 (10.1093/nar/gkw377).
- 83. A. Muslimovic, I. H. Ismail, Y. Gao, O. Hammarsten, An optimized method for measurement of gamma-H2AX in blood mononuclear and cultured cells. *Nat Protoc* **3**, 1187-1193 (2008)10.1038/nprot.2008.93).
- 84. A. J. Pierce, R. D. Johnson, L. H. Thompson, M. Jasin, XRCC3 promotes homology-directed repair of DNA damage in mammalian cells. *Genes Dev* **13**, 2633-2638 (1999); published online EpubOct 15 (
- 85. J. Guirouilh-Barbat, S. Huck, P. Bertrand, L. Pirzio, C. Desmaze, L. Sabatier, B. S. Lopez, Impact of the KU80 pathway on NHEJ-induced genome rearrangements in mammalian cells. *Mol Cell* **14**, 611-623 (2004); published online EpubJun 04 (10.1016/j.molcel.2004.05.008).
- 86. T. C. Chou, Drug combination studies and their synergy quantification using the Chou-Talalay method. *Cancer Res* **70**, 440-446 (2010); published online EpubJan 15 (10.1158/0008-5472.CAN-09-1947).
- 87. T. C. Chou, Theoretical basis, experimental design, and computerized simulation of synergism and antagonism in drug combination studies. *Pharmacol Rev* **58**, 621-681 (2006); published online EpubSep (10.1124/pr.58.3.10).
ACKNOWLEDGEMENTS

We thank Timur Yusufzai, Raphael Ceccaldi, Sebastian Oeck, Benjamin Manning, Neil Umbreit and Peter Bruno for advice and discussions. We are indebted to Veronique Montcuquet, Nicolas Setterblad, Christelle Doliger, and Sophie Duchez from the Saint-Louis Research Institute Core Facility for their technical support.

FUNDING: This research was supported with grants from the US National Cancer Institute (NCI) (NIH R35 CA210030; KS, and NIH K08 CA222684 ; YP), the Children's Leukemia Research Foundation (CLRF) (KS), the Bettencourt Schueller foundation (CCA-INSERM-Bettencourt; LB) and the Bridge Project, a collaboration between the Koch Institute for Integrative Cancer Research at MIT and the Dana-Farber–Harvard Cancer Center (DF-HCC) (KS and MTH). KS was a Leukemia and Lymphoma Society Scholar. AP is a recipient of support from the starting grant form ERC (Horizon 2020), the ATIP–AVENIR and LNCC French research programs, the EHA research grant for a non-clinical advanced fellow, the FSER foundation grant, the Emergence ville de Paris grant and is supported by the St. Louis Association for leukemia research. LB is a CCA-INSERM-Bettencourt laureate and a recipient of Philippe Foundation and GPM fellowships, and research funding from Association Laurette Fugain, LNCC (Comité de Paris) and Gilead Sciences as a "Gilead Research Scholars award" recipient. JME is a recipient of a Swiss National Science Foundation, a Lady Tata Memorial Trust and a Pediatric Cancer Research Foundation fellowships.

AUTHOR CONTRIBUTIONS: BR and CV established conditions for *in vivo* and *in vitro* experiments, acquired and analyzed the data, and wrote the manuscript. JDV, YT, TW, DJA, RLM and HJZ screened for CB-5339, designed and performed the *in vitro* CB-5083 cancer cell lines screening and biochemical *in vitro* and pharmacological assays for CB-5339. GA performed analysis of the *in vivo* shRNA screening data and the bioinformatics analysis of publicly available databases. CB, BP, GS and ASC performed *in vivo* experiments. NF designed, performed, and analyzed the *in vivo* pooled shRNA screening. EM and KL performed analysis of the proteomics data. JME, FLi and LR performed *in vitro* experiments. FLu and PA designed, performed, and analyzed experiments related to proteotoxic and ER stress. CRH, MS and SAC designed and performed the mass spectrometry-based proteomics experiments and performed subsequent data analysis. JGB, BL and MK contributed to experiments related to DNA damage and repair. IG, DJD, and RMS provided patient samples. YP analyzed patient samples and performed *in vitro* experiments. OH and MTH designed experiments and interpreted data. LB developed the study, acquired and analyzed *in vivo* and *in vitro* data. AP, KS and LB supervised the study, designed the *in vitro* and *in vivo* experiments, analyzed the data, wrote and revised the manuscript, and provided funding for the study.

Correspondence and requests for materials should be addressed to lina.benajiba@inserm.fr, Kimberly_Stegmaier@dfci.harvard.edu and alexandre.puissant@inserm.fr.

COMPETING INTERESTS: JDV is an employee of Cleave Therapeutics and YT, TW, DA, RLM and HJZ are former employees of Cleave Therapeutics, a biopharmaceutical company developing VCP inhibitors for therapeutic use in oncology. KS has consulted for Rigel Pharmaceuticals, Kronos Bio, and Auron Therapeutics on unrelated topics, receives grant funding from Novartis which did not

fund this project, and holds stock options with Auron Therapeutics on unrelated topics. LB receives grant support from Gilead Sciences as a "Gilead Research Scholars award recipient". The other authors declare no competing financial interests. The following patents are held by Cleave Therapeutics (formerly Cleave Biosciences): (U.S. Patent Nos.: 9,828,363 and 10,174,005); HJZ is a listed inventor on these patents. Cleave Therapeutics has filed additional provisional patent applications concerning CB-5339 and its uses. JDV, DJA, RLM and HJZ are listed as inventors on the provisional patents.

DATA AND MATERIALS AVAILABILITY: All data associated with this study are available in the main text or the supplementary materials. CB-5339 can be obtained by request to Cleave Therapeutics (contact email: jadvargas@cleavetherapeutics.com).

FIGURE TITLES AND LEGENDS

Figure 1. An *in vivo* **shRNA screen identifies VCP as an AML dependency.**

(A) Model of the doxycycline-inducible shRNA screening.

(B) Waterfall plot of all screened hairpins analyzed using the EdgeR/RIGER method. Top scoring *Vcp*, *Ldha* (positive control), and *Pten* (negative control) hairpins are highlighted in red, black and blue respectively.

(C) Western blot for *Vcp* and *Actin* in MLL-AF9 cells expressing one control (shControl) and two *Vcp*-directed shRNAs (shVcp #1 and #2).

(D) Proportion of shRNA⁺ MLL-AF9 cells in bone marrow, spleen and peripheral blood respectively 19, 19 and 16 days post-injection of MLL-AF9 cells expressing either shControl, sh*Vcp*#1 or sh*Vcp*#2 (n=3 mice per condition). Welch's t-test in comparison with control condition. Error bars represent mean \pm SEM.

(E) Kaplan-Meier curves showing overall survival of mice (n=5 for shControl and n=4 for each sh*Vcp* group) transplanted with cells expressing shControl, sh*Vcp*#1 or sh*Vcp*#2. Arrow indicates the beginning of doxycycline treatment. Log-rank (Mantel-Cox) test. * p < 0.05 by comparison with shControl within the *shVcp#1* or the *shVcp#2* group.

(F) Percentage of shRNA⁺ and shRNA- MLL-AF9 cells in mice bone marrow 14 days post-injection (Early Bone Marrow) of MLL-AF9 cells expressing either shControl, sh*Vcp*#1 or sh*Vcp*#2, and in bone marrow and spleen at time of death (n=7 mice per condition). Mann-Whitney test in comparison with the shControl condition. Error bars represent mean \pm SEM.

(G) Western blot for *Vcp* and *Actin* indicating exogenous (Exo) dominant negative (DN) VCP in MLL-AF9 cells treated with Shield-1 for 24 hours.

(H) Percentage in peripheral blood of MLL-AF9 cells expressing either an empty or a VCP DN-encoding vector 16 days post-transplantation (n=3 mice per condition). Welch's t-test in comparison with empty condition. Error bars represent mean \pm SEM. **(I)** Kaplan-Meier curves showing overall survival of mice (n=5 per condition) transplanted with MLL-AF9 cells expressing either an empty vector or VCP DN. Arrow indicates beginning of Shield-1 and red squares indicate days of Shield-1 injection. Log-rank (Mantel-Cox) test. $* p < 0.05$ by comparison with empty vector.

Figure 2. AML is preferentially sensitive to VCP inhibition.

(A) Distribution of IC⁵⁰ (concentrations of CB-5083 at which viability was reduced by 50%) in a panel of 131 cancer cell lines treated with CB-5083 for three days in duplicate. Cell lines derived from non-oncogenic tissues and cancer types represented by only one cell line were excluded from this analysis. Error bars represent mean ± SEM of all cell lines within each cancer subtype. Kruskal-Wallis Anova test.

(B) Linear regression analysis of the distribution of IC⁵⁰ of a panel of 16 AML cell lines treated with various concentrations of NMS-873 or CB-5083 for four and five days respectively, with four replicates for each condition. Non-parametric Spearman correlation coefficients (ρ) and associated P-value.

(C) Growth inhibition of UT-7 AML cells infected with the indicated Shield-1 inducible constructs and treated with increasing concentrations of NMS-873 for four days. Western blot for VCP and actin indicating VCP WT and a NMS-873-resistant mutant form of VCP (A530T) after Shield-1 treatment for 24 hours. Error bars represent mean of 4 replicates \pm SEM.

(D) Growth inhibition of indicated AML cell lines infected with either a control or two *VCP*-directed shRNAs. Western blot for VCP and actin, 6 days post-doxycycline**.** Data are normalized to the control shRNA and shown relative to day two of doxycycline induction (time of seeding). Welch's t-test in comparison with control condition. Error bars represent mean of 4 to 8 replicates \pm SEM. *p<0.05.

(E) Growth inhibition of indicated human AML cell lines infected with a Shield-1 inducible overexpression vector either empty or encoding WT or dominant negative (DN) VCP**.** Western blot for VCP and actin indicating VCP WT or DN overexpression**,** in MV4-11 cells 24 hours post-Shield-1. Growth inhibition after four days of Shield-1 treatment is normalized to the empty vector and shown relative to non-induced conditions. Welch's t-test in comparison with empty condition. Error bars represent mean of 4 to 8 replicates \pm SEM. *p<0.05.

(F) Colony-forming assay for MV4-11 AML cell line either treated with DMSO or NMS-873 (NMS) at 0.4 μM, or infected with an empty, a VCP WT or DN overexpression construct and treated with Shield-1. Welch's t-test in comparison with control conditions (DMSO or empty). Error bars represent mean of 3 replicates \pm SEM. $*p<0.05$.

(G) Representative FACS plots for annexin V (AV) and propidium iodide (PI) staining of indicated AML cell lines either treated with DMSO or NMS-873 (NMS) at 0.2 μM for 8 days, or infected with an empty or a VCP DN overexpression construct and treated two days with Shield-1. Data representative of two independent experiments.

Figure 3. VCP is a dependency in multiple *in vivo* **AML models and primary AML patient samples.**

(A) Bioluminescence measurements of mice transplanted with MV4-11-luc cells infected with either an empty or a VCP DN-encoding vector (n=5 mice per condition). Welch's t-test in comparison with empty condition. Error bars represent mean \pm SEM. $*$ p < 0.05.

(B) Kaplan-Meier curves showing overall survival of mice (n=5 per condition) transplanted with MV4-11-luc cells expressing either an empty or a VCP DN-encoding vector. Arrow indicates beginning of Shield-1 and red squares indicate days of Shield-1 injection. Log-rank (Mantel-Cox) test. $* p < 0.05$ by comparison with empty vector. **(C-D)** Proportion of MLL-AF9 cells in peripheral blood (n=5 mice per condition) **(C)** and bone marrow (n=4 mice per condition) **(D)**, respectively 18 and 20 days postinjection of MLL-AF9 cells. CB-5083 treatment was started at day 14. Mann-Whitney test in comparison with vehicle. Error bars represent mean \pm SEM.

(E) Bioluminescence measurements of mice transplanted with MV4-11-luc cells and treated with CB-5083 or vehicle (n=5 mice per condition). CB-5083 treatment was started at day 9. Welch's t-test in comparison with vehicle. Error bars represent mean \pm SEM. $*$ p < 0.05.

(F) Kaplan-Meier curves showing overall survival of mice (n=5 per condition) transplanted with MLL-AF9 and treated with CB-5083. Red squares indicate days of CB-5083 treatment. Log-rank (Mantel-Cox) test. $*$ p < 0.05 by comparison with vehicle.

(G) Kaplan-Meier curves showing overall survival of mice (n=5 per condition) transplanted with MV4-11-luc cells and treated with CB-5083 or vehicle. Red squares indicate days of CB-5083 treatment. Log-rank (Mantel-Cox) test. $* p < 0.05$ by comparison with vehicle.

(H-I) Colony-forming assay for primary patient AML samples treated with NMS-873 (n=5) **(H)** or CB-5083 (n=4) **(I)**. Results represent mean of three replicates for each

patient. Welch's t-test in comparison with the control condition. Error bars represent $mean + SEM$.

(J) Proportion of hCD45+ leukemic cells in mice peripheral blood 24 days postinjection of patient derived primary AML cells (n=6 mice per condition). CB-5083 treatment was started 20 days post-injection, after engraftment validation. Mann-Whitney test in comparison with vehicle. Error bars represent mean \pm SEM.

Figure 4. Inhibition of the nuclear function of VCP alters AML cell line viability through impairment of DNA repair.

(A) Western blot for ubiquitin and actin in the indicated AML cell lines treated with 0.4 μM NMS-873 or 10 nM bortezomib for 24 hours.

(B) Western blot for VCP, lamin B1 (nucleus loading control) and tubulin A (cytoplasm loading control) after nuclear/cytoplasmic fractionation of the MV4-11 cell line expressing either a codon optimized "wild-type" VCP (WT) or a NES (nuclear export signal) flanked-WT VCP.

(C) Growth inhibition of the indicated MV4-11 cell lines treated with Shield-1 for six days, and five days post-doxycycline supplementation. Data are normalized to shControl for each condition. Mann-Whitney test in comparison to empty vector condition. Error bars represent mean of 10 replicates \pm SEM.

(D) Western blot for VCP, lamin B1 and tubulin A after nuclear/cytoplasmic fractionation of MV4-11 and UT-7 cell lines expressing either a DN or a NES (nuclear export signal) flanked-DN VCP.

(E) Growth inhibition of indicated AML cell lines treated with Shield-1 for four days. Data are normalized to the empty vector and are shown relative to non-induced

conditions. Mann-Whitney test in comparison to VCP DN condition. Error bars represent mean of two independent experiments with 6 replicates each \pm SEM.

(F) Network depicting the VCP interactome established by quantitative mass spectrometry-based analysis of MV4-11 cells stably expressing V5-tagged WT VCP. Results achieving statistical significance ($log2FC>0.5$ and P-value <0.05) in two biological replicates are shown. VCP interactome was interrogated in a functional enrichment overlapping analysis across the MSigDB database (C2 collection). Protein partners involved in DNA repair, synthesis and cell cycle checkpoints pathways are highlighted in red. -log10FDR calculated through overlapping analysis >1 is defined as threshold of significance.

(G-H) FACS analysis of the intracellular expression of γH2AX in MV4-11 and UT-7 AML cells treated for 72 hours with 0.4 μM NMS-873 or expressing either an empty or a VCP DN vector and treated with Shield-1 for 48 hours**.** Etoposide treatment was used as a positive control. Error bars represent mean \pm SEM of 3 to 4 replicates. 10,000 cellular events were measured for each replicate condition. Welch's t-test in comparison with control condition. $*$ p<0.001.

(I-J) FACS analysis of GFP and CD4 expression in RG37-DR-GFP and GC92-NHEJ-CD4 cells respectively at 48 hours post-transfection with I-SceI endonuclease and treated with either 0.4 μM NMS-873, 5 μM KU-55933 (ATMi), or 2.5 μM KU-57788 (DNAPKi). Error bars represent mean \pm SEM of three biological replicates. 10,000 cellular events were measured for each replicate. Welch's t-test in comparison with control condition. * $p<0.005$.

Figure 5. VCP inhibition impairs ATM phosphorylation and downstream signaling resulting in increased sensitivity to DNA damaging agents.

(A-B) Linear regression analysis of the distribution of IC⁵⁰ of a panel of 16 AML cell lines **(A)** and 16 primary patient AML samples **(B)** treated with various concentrations of NMS-873 or KU-55933 (ATMi) for four and three days respectively, four replicates for each condition. Non-parametric Spearman correlation coefficient (ρ) and associated P-value.

(C-D) FACS analysis of the intracellular expression of P-ATM (S1981) in MV4-11 and UT-7 AML cells treated with NMS-873 for two hours **(C)** or with Shield-1 for 12 hours to stabilize VCP DN **(D).** Etoposide treatment was used to induce DNA damage in order to evaluate the DNA repair signaling response under VCP impairment. Error bars represent mean \pm SEM of three replicates. 10,000 cellular events were measured for each replicate. Welch's t-test in comparison with etoposide conditions for each cell line. $*$ p<0.05.

(E) Western blot for P-ATM (S1981), ATM, P-BRCA1 (S1524), BRCA1, P-KAP1 (S824), KAP1, P-SMC1 (S957), SMC1 and actin, from MV4-11 cells treated with NMS-873 for two hours. Etoposide treatment was used to induce DNA damage, to evaluate the DNA repair signaling response under VCP impairment.

(F-G) Colony-forming assay for MV4-11 AML cell line treated with 0.2 μM NMS-873 for 24H or infected with a Shield-1 inducible empty or VCP DN overexpression construct, and then irradiated with the indicated doses. Welch's t-test in comparison with each control condition. Error bars represent mean of 3 replicates \pm SEM.

(H-I) Isobologram representation **(H)** or Combination Index (CI) plots **(I)** for the combination of NMS-873 with doxorubicin in MV4-11 cell line after four days of treatment. Doxorubicin treatment was added after 24 hours of NMS-873 pre-treatment. Results represent the average of four replicates for each dose combination. Dx denotes the drug concentration required to produce x percentage effect alone, and d denotes the drug concentration required to produce the same x percentage effect in combination with the second drug.

Figure 6. Targeting VCP in AML through a second-generation VCP inhibitor: CB-5339.

(A) Chemical structure and properties of CB-5339 compared to CB-5083.

(B) CB-5339 *in vitro* biochemical selectivity towards PDE6 and retina/plasma tissue distribution compared to CB-5083.

(C) Linear regression analysis of IC⁵⁰ distribution of a panel of 138 cell lines treated with CB-5339 or CB-5083 for three days in duplicates. Non-parametric Spearman correlation coefficient (ρ) and associated P-value.

(D) Linear regression analysis of IC₅₀ distribution of a panel of 11 HCT116 cell lines carrying resistance mutations to CB-5083, treated with CB-5339 or CB-5083 for three days in duplicates. Results are presented as fold resistance compared to the parental HCT116 cell line. Non-parametric Spearman correlation coefficient (ρ) and associated P-value.

(E) Linear regression analysis of IC⁵⁰ distribution of a panel of 16 AML cell lines treated with CB-5339 or CB-5083 (four replicates for each condition). Non-parametric Spearman correlation coefficient (ρ) and associated P-value.

(F) Growth inhibition of 16 primary patient AML samples treated with increasing concentrations of CB-5339 for six days. Error bars represent mean of two replicates \pm SEM.

(G) Proportion of hCD45⁺ leukemic cells in mice bone marrow (n=5 mice per condition) 21 days post-injection of patient-derived primary AML cells. CB-5339 treatment was started 10 days post-injection, after engraftment validation. Mann-Whitney test in comparison with vehicle. Error bars represent mean \pm SEM.

(H) Kaplan-Meier curves showing overall survival of mice (n=5 mice per condition) transplanted with patient-derived primary AML cells and treated with CB-5339 at 90 mg/kg. Red squares indicate days of CB-5339 treatment. Log-rank (Mantel-Cox) test. $* p < 0.05$ by comparison with vehicle.

(I) Proportion of MLL-AF9 cells in peripheral blood (n=6 mice per condition) 12 days post-injection of MLL-AF9 cells. CB-5339 treatment was started at day 8. Mann-Whitney test in comparison with vehicle. Error bars represent mean \pm SEM.

(J) Kaplan-Meier curves showing overall survival of mice (n=6 per condition) transplanted with MLL-AF9 and treated with CB-5339 at 90 mg/kg. Red squares indicate days of CB-5339 treatment. Log-rank (Mantel-Cox) test. $*$ p < 0.05 by comparison with vehicle.

(K) Proportion of MLL-AF9 cells in peripheral blood (n=3 mice per condition) 11 days post-injection of MLL-AF9 cells. Treatment was started at day 9 (CB-5339 at 50 mg/kg for 4 days, Chemo : Doxorubicin at 0.5 mg/kg for 3 days and cytarabine at 75 mg/kg for 5 days). Mann-Whitney test. Error bars represent mean \pm SEM. * p < 0.05 by comparison with vehicle. $\frac{4}{3}$ p < 0.05 by comparison with CB-5339 or Chemo groups.

(L) Kaplan-Meier curves showing overall survival of mice (n=5 per condition) transplanted with MLL-AF9 and treated as indicated. Red squares indicate days of CB-5339 treatment. Log-rank (Mantel-Cox) test. * $p < 0.05$ by comparison with vehicle. $#$ $p < 0.05$ by comparison with CB-5339 or Chemo groups.

Figure 7. Co-occurrence of RAS oncogene activation and TP53 deficiency is associated with decreased response to VCP inhibition.

(A-B) Linear regression analysis of IC⁵⁰ distributions of a panel of 91 cancer cell lines **(A)** or 12 AML cell lines **(B)** treated with CB-5339 for three days compared to VCP mRNA expression data extracted from the CCLE database. Cell lines with no available transcriptional data were excluded from this analysis. R-square coefficient and associated P-value. NS=Not Significant. TPM=Transcripts per Million.

(C-D) FACS analysis of the intracellular expression of γH2AX **(C)** or P-ATM (S1981) **(D)** in the indicated AML cell lines. Error bars represent mean of 2 to 3 replicates \pm SEM. 10,000 cellular events were measured for each replicate. Welch's t-test. NS=Not Significant.

(E) *KRAS, NRAS* and *TP53* mutational profiles (extracted from CCLE database) of the 16 AML cell lines screened for sensitivity to NMS-873. Cell lines harboring both RAS (*KRAS* or *NRAS*) and *TP53* mutations are highlighted in red.

(F) Distribution of IC⁵⁰ in a panel of 13 AML cell lines treated with various concentrations of NMS-873, CB-5083 or CB-5339 (four replicates for each condition). The 3 AML cell lines with no available *RAS-TP53* mutational status were excluded from this analysis. Mann-Whitney test. $*$ p<0.05.

(G-H) *RAS* and *TP53* mutational **(G)** or RAS activation and TP53 deficiency **(H)** cooccurrence frequency across pan-cancer TCGA database (10, 294 patient samples, 33 tumor lineages). Functional RAS activation and TP53 deficiency scores were determined based on two previously validated classifiers. AML subtype is highlighted in red. TCGA acronyms are detailed in **Table S8**.

Empty VCP DN

♠ + Shield1 Days

AML cell lines

PAAD
P.C.P RES
770 LUA czo
czo SS
202 ELA
FLA η KI
HY SKC
SKM
LIN LUD S ESC_A
ROC ACC
ACC ASSES Secolar ્રુજ
જર BRC_{RAC}ESCRIPT K
Kic TGCT LAML spy
0,10 $\mathcal{S}_{\mathcal{L}}$ OR
P HR
KIR <u>مَ</u>ّ MESO PCPG UM \circ 20 40 60 (% co-occurence) RAS and TP53 mutations

RAS activation and TP53 depletion classifier (% co-occurrence)

SUPPLEMENTARY MATERIALS

SUPPLEMENTARY MATERIALS AND METHODS

In Vivo **Transplantation**

Saint-Louis Research Institute, Dana Farber Cancer Institute and the Massachusetts Institute of Technology Committee on Animal Care reviewed and approved all mouse experiments described in this study.

In vivo pooled shRNA screening. A custom library of 2,115 hairpins directed against 429 murine genes involved in cellular stress response with a minimum of 4 hairpins per gene, which were synthesized as an Oligomix from LC Sciences, was cloned into a retroviral TRMPVIR/E2Crimson vector. To preserve library complexity, a minimum of 500-fold coverage of the shRNA library was maintained at each step of the screen. 6-week-old C57BL/6 male donor mice (The Jackson Laboratory) were injected with 200,000 MLL-AF9-DsRed-L-GMP cells into the tail vein. Bone marrow was harvested from femur, tibia and humerus, and red blood cells were lysed (Sigma). DsRed sorted cells were resuspended in transplant medium made with 20 ng/ml IL-3 (#213-13, Peprotech), 20 ng/mL IL-6 (#216-16, Peprotech), 100 ng/mL FLT3-ligand (#250-31L, Peprotech) and 100 ng/mL SCF (#250-03, Peprotech) in StemSpan SFEM (#09650, StemCell Technologies Inc.) and then transduced with TRMPVIR/E2Crimson-library vector by one round of spin-infection. 10×10^6 cells in 3 mL transplant medium containing 5 μg/mL polybrene (Sigma) and 7.5 mM HEPES buffer (Sigma) were centrifuged in the presence of virus for 4 hours at 1800g to promote cell transduction. After 24 hours, cells were sorted based on expression of the GFP fluorescent protein and then reinjected into 15 secondary recipient mice. These mice were randomized into

3 groups i) one group "input", ii) one group treated with doxycycline for two days, and iii) one group treated with doxycycline throughout the experiment. Doxycycline induction was started 7 days post-injection by supplementation of the drinking water with 1 mg/mL doxycycline and 5% sucrose. MLL-AF9 cells were harvested and sorted based on the expression of the crimson fluorescent dye. The antisense strand of shRNA was amplified from genomic DNA using primers that include 1-basepair mutation to barcode individual samples. Hairpins were amplified in multiple 50 μl reactions using HotStar Taq (Qiagen). After PCR amplification, samples were pooled and prepared for sequencing with Illumina's genomic adaptor kit. At least 41 bases of the PCR product were sequenced with an Illumina HiSeq 2000 machine and then aligned with bowtie2 to the mouse mm9 genome at the Swanson Biotechnology Center, Koch Institute, Massachusetts Institute of Technology. shRNAs with less than 100 reads in the input sample were excluded from further analysis, and read numbers for each shRNA were normalized to the total read numbers per sample to allow for cross-comparison between samples.

The genes whose depletion blocked (or enhanced) the cell proliferation between the groups of mice (doxycycline vs vehicle, n=5 per group) were determined based on the EdgeR (*72, 73*) method followed by the RIGER method (*74*) (https://software.broadinstitute.org/GENE-E/extensions/RIGER.jar).

EdgeR was used to perform the differential analysis on the shRNA count data between the groups of mouse samples. RIGER ranked all the 2,115 shRNAs according to their differential score between the two classes of samples, then identified the genes targeted by the shRNAs at the top of the list, by computing a gene Normalized Enrichment Score (NES), based on the Kolmogorov-Smirnov statistic for gene enrichment in the top hairpins. The significance of the normalized enrichment score was estimated through a permutation P-value $(n=10^9$ repetitions) adjusted for false discovery based on the Benjamini-Hochberg method, with a significance cut-off ≤ 0.10 . The significance cutoff was estimated as 0.10 instead of 0.05 due to the small size of the hairpin library. In this way, the EdgeR/RIGER methods identified 34 significantly depleted genes.

Low-throughput in vivo Vcp dependency validation in the MLL-AF9 mouse model: For shRNA and VCP-DN overexpression experiments, 6 to 8 week-old C57BL/6 male mice (The Jackson Laboratory) were injected with 200,000 MLL-AF9-DsRed-L-GMP cells after infection with either TRMPVIR/E2Crimson, TRMPVIR/E2CrimsonshVCP#1, TRMPVIR/E2Crimson-shVCP#2, pRetroX-pTUNER-Empty or pRetroXpTUNER-VCP-DN. For the relapse evaluation experiment, Venus positive MLL-AF9- DsRed-L-GMP cells were sorted to purify the successfully infected population before tail vein injection of 150,000 MLL-AF9-DsRed-L-GMP Venus⁺ cells. Hairpins and VCP-DN expression was induced by supplementing the drinking water with 1 mg/ml doxycycline and 5% sucrose throughout the experiment, and by IP. injection of 40 µL with 10 mg/kg Shield-1 in 50% N,N-dimethylacetamide, 45% PEG400 and 5% Tween-80 at days 10, 12, 14, 16 and 18, respectively. Peripheral blood mononuclear cells were collected by sub-mandibular bleeding while bone marrow biopsies were performed on mice femurs at the indicated time points to collect bone marrow mononuclear cells. Bone marrow and spleen mononuclear cells were also harvested after mice sacrifice . For *in vivo* knockdown or overexpression experiments, Vcp extinction was evaluated by western blot.

Low-throughput in vivo Vcp dependency validation in the MV-411-Luc mouse model: MV4-11 cells were transduced with the pMMP-LucNeo retrovirus and selected with neomycin at 1 mg/mL. MV4-11-luc cells were then stably infected wit either pRetroX-pTUNER-Empty or pRetroX-pTUNER-VCP-DN. 1x10⁶ cells were subsequently injected via tail vein into 8-week-old male NSG mice (The Jackson Laboratory). VCP-DN expression was induced by IP as described. Mice were imaged at the indicated time points on an IVIS Spectrum (Caliper Life Sciences) to assess bioluminescence.

In vivo drug treatment studies: $1x10^6$ MV4-11-luc cells, $100,000$ or $200,000$ MLL-AF9-DsRed-L-GMP cells, or 500,000 patient derived primary AML cells were injected via tail vein into 8-week-old male NSG mice, 6-week-old C57BL/6 male mice, or 6 week-old male and female NSGS or NOG-EXL mice respectively (The Jackson Laboratory and Taconic Biosciences). After disease engraftment confirmation, mice were randomized to be treated with CB-5083 (50 mg/kg, oral gavage, 4 days on - 3 days off schedule) or vehicle (0.5% methylcellulose) as previously described (*20*). CB-5339 was delivered through oral gavage at the indicated doses. Doxorubicin and cytarabine were used intraperitoneally, respectively at 0.5 mg/kg for 3 days and 75 mg/kg for 5 days. Mice were imaged at the indicated time points on an IVIS Spectrum (Caliper Life Sciences) to assess bioluminescence. Peripheral blood mononuclear cells were collected by sub-mandibular bleeding and bone marrow mononuclear cells were harvested by bone marrow biopsy at the indicated time points. Bone marrow and spleen mononuclear cells were also harvested after mice were sacrificed for the relapse experiment. Complete blood counts were measured at the indicated time point.

Cell Culture

HL-60, U937, Kasumi-1, Kasumi-3, and TF-1 cell lines were purchased from the American Type Culture Collection. NOMO-1, UT-7 and UCSD-AML were purchased from DSMZ. EOL-1 were purchased from Sigma-Aldrich. NB-4, MV4-11, SKM-1 and Mo7e were provided by Ross Levine, MOLM-13 by Benjamin Ebert, THP-1 and MOLM-14 by Scott Armstrong and U2OS by David Pellman. All cell lines except MOLM-13, SKM-1, Kasumi-1, TF-1, UT-7, Kasumi-3, Mo7e, UCSD-AML1 and U2OS were maintained in RPMI 1640 (Cellgro) supplemented with 1% penicillinstreptomycin (PS, Invitrogen) and 10% fetal bovine serum (FBS, Sigma-Aldrich) at 37 °C with 5% CO2. MOLM-13, SKM-1 and Kasumi-1 cells were maintained in RPMI 1640 supplemented with 1% penicillin-streptomycin and 20% FBS. TF-1, UT-7, Kasumi-3, Mo7e and UCSD-AML1 were maintained in RPMI 1640 supplemented with 1% penicillin-streptomycin and 10% FBS with 20 ng per ml GM-CSF (Peprotech). All AML cell lines were confirmed by STR genotyping.

Cancer cell lines for the large scale cell lines screening were obtained from American Type Culture Collection and cultured according to the supplier's instructions. HEK-293T and U2OS were maintained in Dulbecco's modified Eagle's medium (Cellgro) supplemented with 10% fetal bovine serum (FBS, Sigma-Aldrich) and 1% penicillinstreptomycin (PS, Invitrogen). MLL-AF9-DsRed-L-GMP cells were maintained in StemSpan SFEM (#09650, StemCell Technologies Inc.) with 20 ng/ml IL-3 (#213-13, Peprotech), 20 ng/ml IL-6 (#216-16, Peprotech), 100 ng/ml FLT3-ligand (#250-31L, Peprotech) and 100 ng/ml SCF (#250-03, Peprotech).

Primary patient AML blasts were collected from bone marrow aspirates after obtaining patient informed consent under a Dana-Farber Cancer Institute Internal Review Boardapproved protocol. Mononuclear cells were isolated using Ficoll-Paque Plus (Amersham Biosciences) and red blood cells were lysed (eBioscience). These cells were maintained in StemSpan SFEM (StemCell Technologies Inc.) medium supplemented with 20 ng/ml IL-3 (Peprotech), 20 ng/ml IL-6 (Peprotech), 20 ng/ml GM-CSF (Peprotech), 100 ng/ml FLT3-ligand (Peprotech) and 100 ng/ml SCF (Peprotech). For CB-5339 *in vitro* assays, primary patient AML blasts were obtained from leukapheresis, following Champions Oncology institutional committee protocols. Samples were cultured in cytokine enriched media (StemSpan SFEM, StemSpan TM CC110 (StemCell Technologies Inc.) and recombinant human IL-3 (R&D Systems)).

Chemicals

NMS-873, KU-57788, etoposide, bortezomib and MG-132 were purchased from Selleckchem, KU-55933 from Abcam, Shield-1 from Aobious, TLCK hydrochloride and epoxomicin from Santa Cruz Biotechnology, tunicamycin from EMD Millipore or Sigma, thapsigargin from Sigma, doxycycline from Clontech, and doxorubicin from Cell Signaling. CB-5083 was purchased from Selleckchem or provided by Cleave Therapeutics. CB-5339 was provided by Cleave Therapeutics.

Biochemical assays

CB-5083 and CB-5339 *in vitro* biochemical analyses for VCP were performed using a standard NADH-based coupled kinetic ATPase assay as previously described (*20, 21*). CB-5083 and CB-5339 *in vitro* biochemical analyses for bovine retina PDE6 and recombinant human PDE6C were performed by Eurofins Cerep, Celle l'Evescault France and BPS Bioscience, San Diego, CA USA, respectively, using their standard enzymatic inhibition assays. Briefly, VCP inhibition activity on PDE6C from human retina was determined by enzymatic reactions conducted at room temperature for 60 minutes in a 50 μl reaction mixture consisting of PDE assay buffer (BPS Biosciences), 100 nM FAM-cGMP, 0.5 ng PDE6 enzyme and a 0.001 to 10 μM dilution range of VCP inhibitor. After the enzymatic reaction, 100 μl of cGMP binding solution (BPS Biosciences) was added and allowed to incubate at room temperature for 60 minutes. Fluorescence intensity was measured at an excitation of 485 nm and an emission of 528 nm using a Tecan Infinite M1000 microplate reader. The effect of VCP inhibition on PDE6 isolated from bovine retina was determined by measuring the conversion of [3H] cGMP to the [3H]-5'-GMP mononucleotide by radiometric scintillation counts after a 60 minutes incubation of a [3H]-cGMP + cGMP (2uM)(Eurofins – CEREP) 100 μl reaction mixture with an 8 point dilution series of inhibitor.

Pharmacological assays

Metabolic stability was assessed in liver microsomes from rat, dog, monkey and human, and clearance was calculated. *In vivo* tissue distribution and bioavailability (F%) was determined from pharmacokinetic measurements. For bioavailability, pharmacokinetic assessement of the areas under the plasma concentration versus time curves following iv and oral administration in rat (Cleave Therapeutics), dog (BioDuro) and monkey (Charles River) was used. Tissue distribution was determined from analysis of tissue samples after oral administration (WuXi Apptec).

Cleave Therapeutics IACUC or contracted company Committee on Animal Care reviewed and approved the rat, dog and monkey experiments described in this study.

Plasmids, shRNA Constructs and cell infection

The pMMP LUC-NEO vector was a kind gift from Andrew Kung. (WT)-EGFP and VCP(DK0)-EGFP (a gift from Nico Dantuma, Addgene plasmids # 23971 and # 23974) were amplified using primers listed below and then cloned into pRetroX-pTUNER (Clontech).

The codon optimized VCP geneblock was designed and synthesized by Integrated DNA Technologies, before cloning into pRetroX-pTUNER (Clontech).

shRNA constructs targeting murine VCP (shVCP#1 and shVCP#2) and human *VCP* (shVCP#3, shVCP#4) – sequences listed below – were designed by adapting BIOPREDsi small interfering RNA predictions. shRNAs were cloned into the REVIR retroviral vector following instructions from a previously published protocol (*75*). Briefly, 97-mer oligonucleotides (IDT Ultramers) coding for the shRNAs were PCR amplified using the forward (5′-TGAACTCGAGAAGGTATATTGCTGTTGACAGTGAGCG-3′) and the reverse (5′- TCTCGAATTCTAGCCCCTTGAAGTCCGAGGCAGTAGGC-3′) primers, 0.05 ng oligonucleotide template, and the PfuUltra HF kit (Agilent), and cloned into miRE recipient vectors.

For virus production, 12 μg of the above plasmids and 6 μg ψ-eco (for retroviral infection of murine cells), 6 μg pCMV-GAG/POL and pCMV-VSVG (for retroviral infection), or 6 μg pCMV8.9 or psPAX2 and pCMV-VSVG (for lentiviral infection) packaging vectors were transfected into the 293T packaging cell line using XtremeGENE 9 (Roche), and the resulting viral supernatants were harvested as previously described (*76*). The lentiviral and retroviral viruses were then concentrated using PEG-it™ Virus Precipitation Solution or Retro-concentin (SBI System Biosciences) respectively. Cells were infected using RetroNectin (Clontech) following the manufacturer's recommendations for retroviral vectors and as previously described for lentiviral plasmids (*76*). At least 72h post infection, cells were selected for stable expression of the corresponding plasmids through GFP sorting. Doxycycline inducible constructs were sorted for DsRed induced population 24 to 48h post doxycycline treatment at 1 µg/mL.

Site-directed Mutagenesis

The different point mutations and deletions in the *VCP* sequence were obtained using a QuikChange XL Site-directed Mutagenesis kit (Stratagene). The sequence of primers used for these mutagenesis reactions are listed below.

Growth Measurement

To assess growth, cells were plated in 384-well or 96-well cell-culture coated white plates for cell lines and patient samples respectively. Ten and six concentrations of each chemical were tested respectively for AML cell lines and primary patient samples. ATP content was then measured using CellTiter-Glo (Promega) per the manufacturer's instructions. Briefly, CellTiter-Glo reagent was added to each well and incubated at room temperature for 10 minutes prior to luminescence reading at the indicated time points. PRISM GraphPad software was used for statistical analysis.

Western Blotting

Cells were lysed in Cell Signaling Lysis Buffer (Cell Signaling Technology), EDTAfree Protease Inhibitor Cocktail tablets (Roche Diagnostics), and PhosSTOP Phosphatase Inhibitor (Roche Diagnostics), resolved by gel electrophoresis using Novex 4%–12% Bis-Tris or 3-8% Tris-acetate gels (Invitrogen), transferred to nitrocellulose membranes (Bio-Rad), and blocked for 1 hour in 5% BSA (Sigma-Aldrich). Blots were incubated with primary antibodies, followed by secondary antibodies. Bound antibody was detected using Western Lightning Chemiluminescence Reagent (Perkin Elmer). Nuclear/cytoplasmic extraction was performed using a Biovision kit per the manufacturer's protocol.

Mass Spectrometry and Proteomics Analysis

Cellular preparation and immune-precipitation: MV4-11 cells were first infected with either pRetroX-pTUNER-Empty (control) or pRetroX-pTUNER-VCP-WT-V5, allowing immunoprecipitation of a V5-tagged form of VCP. Cells were then lysed using 150 mM NaCl, 50 mM Tris pH 7.5, 1% IGPAL-CA-630 (Sigma) and EDTA-free Protease Inhibitor Cocktail tablets and PhosSTOP Phosphatase Inhibitor (Roche Diagnostics). 1.5 mg of input protein lysates were then incubated for 12-18 hours with anti-V5-tag magnetic beads (MBL) or sepharose beads (Life Technologies) preincubated with the indicated antibodies (normal mouse or rabbit IgG from Santa Cruz were used as controls). Two washes using 150 mM NaCl, 50 mM Tris pH 7.5, 0.05% IGPAL-CA-630 buffer were followed by 2 washes using 150 mM NaCl, 50 mM Tris pH 7.5 buffer.

On-bead digest: Beads from immunopurification were washed once with IP lysis buffer, then 3 times with PBS, and the 3 different lysates of each replicate were resuspended in 90 μ L digestion buffer (2 M Urea, 50 mM Tris HCl), 2 μ g of sequencing grade trypsin added, 1 hour shaking at 700rpm. Supernatant was removed and placed in a fresh tube. Beads were then washed twice with 50 µL digestion buffer and combined with the supernatant. The combined supernatants were reduced (2 µL 500 mM DTT, 30 minutes, RT), alkylated (4 uL 500 mM IAA, 45 minutes, dark) and a longer overnight digestion performed: 2μ g (4 μ L) trypsin, shake o/n, the samples were then quenched with 20 µL 10% FA and desalted on 10 mg Oasis cartridges.

TMT6 labeling of peptides and basic reversed phase (brp) fractionation: Desalted peptides were labeled with TMT6 reagents. Peptides were dissolved in 25 µL of fresh 100 mM HEPES buffer. The labeling reagent was resuspended in 42 µl of acetonitrile and 10 µl added to each sample as described below. After 1 h incubation the reaction was stopped with 8 μ L of 5 mM hydroxylamine. Differentially labeled peptides were mixed and subsequently fractionated on StAGE tips as previously described (*77*). BRP fractionation of the differentially labelled was performed and combined. Samples were dried down and resuspended in 3% acetonitrile (ACN), 5% formic acid, loaded onto the cartridge washed twice with 1 mL of 3% ACN in 5 mM ammonium formate pH10 save as fraction 0. Step-wise elution as follows:

Fraction 1 (Collect)- Elute samples with 10% ACN in 5 mM ammonium formate 300 µL. Fraction 2 (Collect)- Elute samples with 15% ACN in 5 mM ammonium formate 300 µL. Fraction 3 (Collect)- Elute samples with 20% ACN in 5 mM ammonium formate 300 µL. Fraction 4 (Collect)- Elute samples with 30% ACN in 5 mM ammonium formate 300 µL. Fraction 5 (Collect)- Elute samples with 40% ACN in 5 mM ammonium formate 300 µL. Fraction 6 (Collect)- Elute samples with 50% ACN in 5 mM ammonium formate 300 µL. Empore SDB disk used to make StageTips as described in the paper (*77*).

Mass Spectrometry analysis: Reconstituted peptides were separated on an online nanoflow EASY-nLC 1000 UHPLC system (Thermo Fisher Scientific) and analyzed on a benchtop Orbitrap Q Exactive Plus mass spectrometer (Thermo Fisher Scientific). The peptide samples were injected onto a capillary column (Picofrit with 10 μm tip opening / 75 μm diameter, New Objective, PF360-75-10-N-5) packed in-house with 20 cm C18 silica material (1.9 μm ReproSil-Pur C18-AQ medium, Dr. Maisch GmbH, r119.aq). The UHPLC setup was connected with a custom-fit microadapting tee (360 μm, IDEX Health & Science, UH-753), and capillary columns were heated to 50 °C in column heater sleeves (Phoenix-ST) to reduce backpressure during UHPLC separation. Injected peptides were separated at a flow rate of 200 nL/min with a linear 80 min gradient from 100% solvent A (3% acetonitrile, 0.1% formic acid) to 30% solvent B (90% acetonitrile, 0.1% formic acid), followed by a linear 6 min gradient from 30% solvent B to 90% solvent B. Each sample was run for 120 min, including sample loading and column equilibration times. The Q Exactive instrument was operated in the data-dependent mode acquiring HCD MS/MS scans (R=17,500) after each MS1 scan $(R=70,000)$ on the 12 top most abundant ions using an MS1 ion target of 3x 10⁶ ions and an MS2 target of $5x10^4$ ions. Isolation width of 0.7. The maximum ion time utilized for the MS/MS scans was 120 ms; the HCD-normalized collision energy was set to 31; the dynamic exclusion time was set to 20s, and the peptide match and isotope exclusion functions were enabled.

Quantification, identification of peptides and proteins and data analysis: All mass spectra were processed using the Spectrum Mill software package v6.0 pre-release (Agilent Technologies) which includes modules developed by us for TMT -based quantification. Precursor ion quantification was done using extracted ion chromatograms (XIC's) for each precursor ion. The peak area for the XIC of each precursor ion subjected to MS/MS was calculated automatically by the Spectrum Mill software in the intervening high-resolution MS1 scans of the LC-MS/MS runs using narrow windows around each individual member of the isotope cluster. Peak widths in both the time and *m*/*z* domains were dynamically determined based on MS scan resolution, precursor charge and *m*/*z,* subject to quality metrics on the relative distribution of the peaks in the isotope cluster vs theoretical. Similar MS/MS spectra acquired on the same precursor m/z in the same dissociation mode within $+\prime$ - 60 sec were merged. MS/MS spectra with precursor charge >7 and poor quality MS/MS spectra, which failed the quality filter by not having a sequence tag length > 1 (i.e., minimum of 3 masses separated by the in-chain mass of an amino acid) were excluded from searching.

For peptide identification MS/MS spectra were searched against human Uniprot database to which a set of common laboratory contaminant proteins was appended. Search parameters included: ESI-QEXACTIVE-HCD scoring parameters, trypsin enzyme specificity with a maximum of two missed cleavages, 40% minimum matched peak intensity, \pm /- 20 ppm precursor mass tolerance, \pm /- 20 ppm product mass tolerance, and carbamidomethylation of cysteines and iTRAQ labeling of lysines and peptide n-termini as fixed modifications. Allowed variable modifications were oxidation of methionine, N-terminal acetylation, Pyroglutamic acid (N-termQ), Deamidated (N), Pyro Carbamidomethyl Cys (N-termC), with a precursor MH+ shift range of -18 to 64 Da. Identities interpreted for individual spectra were automatically designated as valid by optimizing score and delta rank1-rank2 score thresholds separately for each precursor charge state in each LC-MS/MS while allowing a maximum target-decoy-based false-discovery rate (FDR) of 1.0% at the spectrum stage.

In calculating scores at the protein stage and reporting the identified proteins, redundancy is addressed in the following manner: the protein score is the sum of the scores of distinct peptides. A distinct peptide is the single highest scoring instance of a peptide detected through an MS/MS spectrum. MS/MS spectra for a particular peptide may have been recorded multiple times, (i.e. as different precursor charge states, isolated from adjacent brp fractions, modified by oxidation of Met) but are still counted as a single distinct peptide. When a peptide sequence >8 residues long is contained in multiple protein entries in the sequence database, the proteins are grouped together and the highest scoring one and its accession number are reported. In some cases when the protein sequences are grouped in this manner there are distinct peptides which uniquely represent a lower scoring member of the group (isoforms or family members). Each of these instances spawns a subgroup and multiple subgroups are reported and counted towards the total number of proteins. TMT6 ratios (protein enrichment between channels) were obtained from the protein-comparisons export table in Spectrum Mill.

Before final analyses non human proteins and proteins with less than two unique peptides identified were removed and the data were median normalized. Resulting data were analysed and visualized using R (http://www.R-project.org). First, statistical analyses were performed via moderated t-test from R package limma (*78*) to estimate P-values for each gene/protein, next the false discovery rate corrections (FDR) were applied to account for multiple hypothesis testing. Plots were created using *ggplot2 (79)* and in-house R scripts. The gene networks were created using InWeb - Genets

(http://apps.broadinstitute.org/genets). The C2 tier of pathways from Molecular Signatures Database (*80*) was chosen to perform pathways analysis enrichment in R. The statistical significance of pathway enrichment was based on hypergeometric distribution further corrected by applying FDR.

To compare our MV4-11 VCP interactome with the previously reported HEK-293T cells interactome (*26*), we extracted the union of the lists of interacting proteins detected after stable overexpression of N or C terminal HA or Flag tagged VCP in HEK-293T cells. This list was first compared to the full list of detected proteins in our mass spectrometry experiment before filtering for high confidence interacting proteins. We then filtered the HEK-293T cells mass-spectrometry data to highlight the high confidence VCP candidate interacting proteins as previously reported (NWD-score ≥ 0.98, Z-score \geq 4, and average assembled peptide spectral matches (APSMs) \geq 2) (26). This filtered list was compared to our high-confidence VCP interacting proteins in the MV4-11 cell line applying the following significance thresholds: log2FC>0.5 and Pvalue<0.05.

Enrichr overlapping analysis across the KEGG_2019, Reactome_2016, Bioplanet 2019 and Elsevier Pathways gene-sets was performed on the 80 "MV4-11" only" or on the 26 "HEK-293T only" VCP-interacting proteins (*81, 82*). Results were ranked by enrichment combined scores and the top-scoring pathways were plotted as bar graphs. Pathways with an adjusted p-value > 0.05 were excluded.
Proteasome Activity Quantitative Assays

Cells were treated for 24 hours with $0.4 \mu M$ of NMS-873. Bortezomib (10 nM), MG132 (1 μ M), epoxomycin (100 nM) or Tlck (100 μ M) were used as positive controls. Then, the cells were collected, washed, and lysed for 30 min at 4°C in an ATP-containing lysis buffer (50 mM HEPES pH 7.8, 5 mM ATP, 0.5 mM DTT, 5 mM MgCl2 and 0.2 % Triton X-100). Cell lysates were cleared at 16,000 ×g for 15 min at 4°C. Normalized protein lysates (10 μg/well) were incubated in a 96-well plate with 0.1 mM of either Z-Leu- Leu-Glu-AMC, Suc-Leu-Leu-Val-Tyr-AMC or Ac-Arg-Leu-Arg-AMC to measure caspase-, chymotrypsin- and trypsin-like activities, respectively (Enzo). Proteasome activities were measured by following emission at 460 nm (excitation at 390 nm). Each experiment was performed in quadruplicate. PRISM GraphPad software was used for statistical analysis.

Flow cytometry

Cell surface marker staining was performed as follows. Cell lines were washed in PBS-0.1% BSA-2 mM EDTA before a 35-minute incubation with cell surface marker antibodies. Murine peripheral blood, bone marrow and spleen were collected from each organ, washed with PBS-0.1% BSA-2 mM EDTA and lysed for 10 minutes with red blood cell lysis buffer (Sigma). After two washing steps with PBS-0.1% BSA-2 mM EDTA, bone marrow cells were stained for 30 minutes at 4°C with corresponding cell surface antibodies. Cells were then washed twice with PBS-0.1%BSA-2 mM EDTA before analysis of 10,000 cells for each condition with BD FACSCanto II (BD Biosciences).

Intracellular protein staining for p-ATM and γH2AX was performed as previously described (*83*).

Annexin V / PI staining was performed using the Annexin V apoptosis detection kit per the manufacturer's protocol (Affymetrix, eBioscience). Cells were immediately analyzed on BD FACScanto II (BD Biosciences).

A list of antibodies used for western blotting, immunoflourescence and flow cytometry is provided below.

HR and NHEJ Reporter Assays

RG37-DR-GFP (*84*) and GC92-NHEJ-CD4 (*85*) cells were transiently transfected with I-SceI endonuclease and then treated with 0.4 µM NMS-873, 5 µM KU-55933, or 2.5 µM KU-57788. 48 hours post transfection, HR (GFP) and NHEJ (CD4) activities were measured by flow cytometry on BC FACScanto II (BD Biosciences). PRISM GraphPad software was used for statistical analysis.

Methylcellulose colony formation assay

Five thousand primary patient cells were plated in triplicate into semisolid methylcellulose medium (MethoCult H4236, StemCell Technologies) supplemented with 20 ng/ml IL-3 (Peprotech), 20 ng/ml IL-6 (Peprotech), 20 ng/ml GM-CSF (Peprotech), and 100 ng/ml SCF (Peprotech). After at least 10 days, the colony number was evaluated after MTT staining of the colonies (R&D Systems). For irradiation sensitivity evaluation, 250 to 500 cells were seeded in methylcellulose-based medium (ClonaCell-TCS Medium) with NMS-873 and irradiated at the indicated dose after 24H of NMS-873 pre-treatment. Colony number was evaluated after 4 days. PRISM GraphPad software was used for statistical analysis.

Drug interaction analysis

Estimation of the dose-inhibitory fraction relationship for the combination of NMS-873 or CB-5339 and doxorubicin was based on a dose–effect strategy: the Chou–Talalay combination index (CI) for Loewe additivity, based on the Chou-Talalay Median Effect model (*86, 87*) as implemented in CalcuSyn v2.11 (http://www.biosoft.com/w/calcusyn.htm). If CI < 1, the drugs have a synergistic effect, and if $CI > 1$, the drugs have an antagonistic effect. $CI = 1$ means the drugs have additive effect.

CCLE mRNA expression analysis

VCP mRNA expression (TPM= Transcripts per Million) was obtained from the publicly available Cancer Cell Line Encyclopedia (CCLE) database [\(https://depmap.org/portal/download/\)](https://depmap.org/portal/download/) (*31, 32*). A linear regression analysis of IC50 distribution of a panel of 91 cancer cell lines or 12 AML cell lines treated with CB-5339 and VCP mRNA expression was then performed. R-square coefficient and associated P-value were calculated.

CCLE mutations analysis

KRAS, *NRAS* and *TP53* detailed mutational profiles of AML cell lines were extracted from the CCLE (Cancer Cell Line Encyclopedia) database (*31, 32*) mutation data version 18Q4 (depmap_18Q4_mutation_calls.csv), publicly available from the Depmap portal (https://depmap.org/portal/download/).

TCGA pan-cancer analysis

The pan-cancer TCGA database accounting for 10,294 patient samples across 33 tumor lineages (https://cancergenome.nih.gov/publications; (*33*)) was interrogated to identify the frequency of co-occurrence of *TP53* and *RAS* non-silent mutations across tumor types. In addition, the co-occurrence of *RAS* activation and *TP53* depletion across the pan-cancer TCGA cohorts was computed based on functional classifiers as previously described (*34, 35*).

SUPPLEMENTARY FIGURES

Figure S1. MLL-AF9 AML disease burden evolution after VCP knock-down.

(A-C) Percentage of MLL-AF9 cells in mice bone marrow 14 days post-injection **(A)** of MLL-AF9 cells expressing either shControl, sh*Vcp*#1 or sh*Vcp*#2, and in bone marrow **(B)** and spleen **(C)** at time of death (n=7 mice per condition). Statistical significance determined using Mann-Whitney test in comparison with the shControl condition. Error bars represent mean \pm SEM.

Figure S2. CB-5083 tolerability profile.

(A) Weight was measured starting from day 1 of CB-5083 treatment at 50 mg/kg and until vehicle mice death, in C57/BL6 mice injected with MLL-AF9 cells (n=5 mice per condition).

(B-D) Complete blood counts were measured at day 5 of treatment with CB-5083 at 50 mg/kg in C57/BL6 mice (n=4 mice per condition).

Figure S3

Figure S3. VCP inhibition does not primarily impair AML cell growth through induction of proteotoxic/ER stress.

(A) Western blot for ubiquitin and actin (loading control) from the indicated AML cell lines overexpressing VCP DN construct.

(B) Western blot for GRP78 and actin (loading control) from the indicated AML cell lines treated with 0.4 μM NMS-873 for 24 hours. Tunicamycin 1 μg/mL was used as positive control.

(C) Western blot for ubiquitin and vinculin (loading control) in MV4-11 AML cell line treated with the indicated dose of NMS-873 or 10 nM bortezomib for 24 hours.

(D) Linear regression analysis of IC⁵⁰ distribution of a panel of 16 AML cell lines treated with NMS-873 or bortezomib for four days (4 replicates for each condition). Non-parametric Spearman correlation coefficient (ρ) and associated P-value are calculated. NS=Not Significant.

(E) Caspase-, trypsin- and chymotrypsin-like proteasome activities from the indicated cell lines treated with 0.4 μM NMS-873 for 24 hours. Data are represented as mean of four replicates +/- SEM. Bortezomib is used as a positive control for all cell lines and MG-132, TLCK and epoxomicin are used as positive controls in NB-4 and NOMO-1.

Figure S4

Figure S4. Comparative proteomic analysis identifies VCP-interacting proteins in an AML context.

(A) VCP-interacting proteins identified by mass spectrometry-based interactome analysis from MV4-11 cells stably expressing a V5-tagged wild-type VCP construct (Gray dots). Data are presented as a volcano plot of –log10 (P-value) versus average log2FC of two biological replicates. Black dot and blue dots represent VCP itself and

two known critical VCP-interacting partners, UFD1L and NPLOC4, respectively. log2FC>0.5 and P-value<0.05 are defined as thresholds for significance.

(B,C) Venn diagrams of VCP-interacting proteins in the MV4-11 AML cell line compared to the HEK-293T cell line, including either all mass-spectrometry detected proteins **(B)** or restricted to high confidence interacting proteins in each cellular context **(C)**.

(D) Enrichr overlapping analysis of high confidence AML context VCP interacting proteins. Bar graphs represent the top-ranked overlapping pathways among each gene sets database. Results are presented as combined enrichment scores. DNA repair and replication pathways are highlighted in red.

(E) Enrichr overlapping analysis of high confidence HEK-293T context VCP interacting proteins. Bar graphs represent the top-ranked overlapping pathways among each gene sets database. Results are presented as combined enrichment scores.

(A) Western blot for ubiquitin and actin (loading control) in MV4-11 AML cell line treated with the indicated concentration of CB-5339 or 10 nM bortezomib for 24 hours. **(B)** Western blot for GRP78, spliced XBP1, ATF4 and actin or vinculin (loading control) from the MV4-11 AML cell line treated with the indicated concentration of CB-5339 for 48 hours. Tunicamycin 1 μg/mL and thapsigargin 1 μM were used as positive controls.

(C) FACS analysis of the intracellular expression of P-ATM (S1981) in the MV4-11 AML cell line treated with CB-5339 for two hours**.** Etoposide treatment was used to induce DNA damage in order to evaluate the DNA repair signaling response under VCP impairment. Error bars represent mean of three replicates \pm SEM. 10,000 cellular events were measured for each replicate condition. P-value calculated using Welch's t-test in comparison with etoposide condition. $*$ p<0.0001.

(D) FACS analysis of the intracellular expression of γH2AX in the MV4-11 AML cell line treated for 48 hours with 0.2 μM CB-5339**.** Etoposide treatment was used as a positive control. Error bars represent mean \pm SEM of 3 replicates. 10,000 cellular events were measured for each replicate condition. P-value calculated using Welch's ttest in comparison with control condition. $*$ p<0.001.

(E) Combination Index (CI) plot for the combination of CB-5339 with doxorubicin in MV4-11 cell line after six days of treatment. Doxorubicin treatment was added after 24 hours of CB-5339 pre-treatment. Results represent the average of four replicates for each dose combination.

(F) Linear regression analysis of the IC⁵⁰ distribution of a panel of 16 AML cell lines treated with CB-5339 or bortezomib (4 replicates for each condition). Non-parametric Spearman correlation coefficient (ρ) and associated P-value are calculated. NS=Not Significant.

(G) Linear regression analysis of the IC⁵⁰ distribution of a panel of 16 AML cell lines treated with CB-5339 or KU-55933 (4 replicates for each condition). Non-parametric Spearman correlation coefficient (ρ) and associated P-value are calculated. NS=Not Significant.

(A) CB-5339 clearance and bioavailability compared to CB-5083 across different species.

(B) Weight was measured starting from day 1 of CB-5339 treatment at 90 mg/kg in C57/BL6 mice injected with MLL-AF9 cells (n=6 mice per condition).

(C-E) Complete blood counts were measured at day 5 of treatment with CB-5339 at 90 mg/kg in C57/BL6 mice injected with MLL-AF9 cells (n=6 mice per condition).

(F,G) Percentage of hCD45+, hCD33+, hCD11b+ and hCD14+ leukemic cells in mice bone marrow **(F)** and spleen **(G)**, at time of death post-injection of patient derived primary AML cells (n=4 to 5 mice per condition). CB-5339 treatment was started 10 days post-injection, after engraftment validation. Mann-Whitney test in comparison with vehicle. Error bars represent mean \pm SEM.

(H) Percentage of hCD11b+ and hCD14+ leukemic cells in mice bone marrow, 21 days post-injection of patient-derived primary AML cells (n=5 mice per condition). CB-5339 treatment was started 10 days post-injection, after engraftment validation. Mann-Whitney test in comparison with vehicle. Error bars represent mean \pm SEM.

SUPPLEMENTARY TABLES

Table S1. List of the top depleted genes identified by the *in vivo* **shRNA screening.**

Gene Normalized Enrichment Scores (NES) and adjusted P-values were calculated using EdgeR/RIGER methods.

Table S2. CB-5083 sensitivity profile across 131 cancer cell lines. Distribution of IC⁵⁰ (concentrations of CB-5083 at which viability was reduced by 50%) in a panel of 131 cancer cell lines treated with CB-5083 in duplicate, for three days. Cell lines are classified by cancer subtype.

Table S3. Patients characteristics. Cytogenetics, molecular and clinical characteristics of patient samples used in this study. n/a: data not available.

Table S4. List of VCP-interacting partners identified by mass spectrometry-based interactome analysis in the MV4-11 AML cell line. Results are presented as Log(FC) for each replicate relative to empty vector and rank ordered based on P-value. Nuclear localization is specified for each protein.

Table S5. List of enriched pathways among VCP interactome. VCP-interacting network identified by mass spectrometry-based analysis of VCP interactome was interrogated in a functional enrichment overlapping analysis across the MsigDB database (C2 collection). All significantly enriched pathways are listed (-log10 (FDR)>1) and selected pathways involved in DNA repair, synthesis and cell cycle are highlighted in bold characters. Results are rank ordered based on -log10 (FDR).

Table S6. List of VCP-interacting partners identified by mass spectrometry-based interactome analysis in the MV4-11 AML cell line compared to the HEK-293T cell line. VCP-interacting proteins are listed according to their mass-spectrometry detection in the MV4-11 cell line, in the HEK-293T cell line or in both cellular contexts. High confidence VCP-interacting proteins are also listed according to the cellular context.

Table S7. RAS and TP53 mutational profiles of AML cell lines according to the

CCLE database. *KRAS*, *NRAS* and *TP53* detailed mutational profiles of the 13 AML cell lines available in the CCLE 18Q4 mutations database and treated with various concentrations of NMS-873 for four days (n=13 with four replicates for each condition). Distribution of the NMS-873 IC₅₀ is reported.

Table S8. Mutational and functional co-occurrence of RAS activation and TP53 deficiency in pan-cancer TCGA cohorts. Co-occurrence frequency of RAS activation and TP53 deficiency assessed based on non-silent mutations and functional classifiers across pan-cancer TCGA database (10, 294 patient samples, 33 tumor lineages). TCGA tumor type acronyms and patients cohort size are detailed.

