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(54) **Title:** TREATMENT OF CANCER WITH DIHYDROPYRAZINO-PYRAZINES

(57) **Abstract:** Provided herein are methods for treating or preventing head and neck squamous cell carcinoma characterized by deletion of chromosome 1 lq22 or loss of ataxia telangiectasia mutated expression, comprising administering an effective amount of a dihydropyrazino- pyrazine to a patient having head and neck squamous cell carcinoma characterized by deletion of chromosome 1 lq22 or loss of ataxia telangiectasia mutated expression.



TREATMENT OF CANCER WITH DIHYDROPYRAZINO-PYRAZINES

[0001] This application claims the benefit of U.S. Provisional Application No. 61/813,026, filed April 17, 2013, the entire contents of which are incorporated herein by reference.

1. FIELD

[0002] Provided herein are methods for treating or preventing head and neck squamous cell carcinoma (HNSCC) characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ataxia telangiectasia mutated (ATM), or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to a patient having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

2. BACKGROUND

[0003] The connection between abnormal protein phosphorylation and the cause or consequence of diseases has been known for over 20 years. Accordingly, protein kinases have become a very important group of drug targets. *See* Cohen, *Nature*, 1:309-315 (2002). Various protein kinase inhibitors have been used clinically in the treatment of a wide variety of diseases, such as cancer and chronic inflammatory diseases, including diabetes and stroke. *See* Cohen, *Eur. J. Biochem.*, 268:5001-5010 (2001), *Protein Kinase Inhibitors for the Treatment of Disease: The Promise and the Problems*, Handbook of Experimental Pharmacology, Springer Berlin Heidelberg, 167 (2005).

[0004] The protein kinases are a large and diverse family of enzymes that catalyze protein phosphorylation and play a critical role in cellular signaling. Protein kinases may exert positive or negative regulatory effects, depending upon their target protein. Protein kinases are involved in specific signaling pathways which regulate cell functions such as, but not limited to, metabolism, cell cycle progression, cell adhesion, vascular function, apoptosis, and angiogenesis. Malfunctions of cellular signaling have been associated with many diseases, the most characterized of which include cancer and diabetes. The regulation of signal transduction by

cytokines and the association of signal molecules with protooncogenes and tumor suppressor genes have been well documented. Similarly, the connection between diabetes and related conditions, and deregulated levels of protein kinases, has been demonstrated. See e.g., Sridhar *et al. Pharmaceutical Research*, 17(11):1345-1353 (2000). Viral infections and the conditions related thereto have also been associated with the regulation of protein kinases. Park *et al. Cell* 101 (7): 777-787 (2000).

[0005] Because protein kinases regulate nearly every cellular process, including metabolism, cell proliferation, cell differentiation, and cell survival, they are attractive targets for therapeutic intervention for various disease states. For example, cell-cycle control and angiogenesis, in which protein kinases play a pivotal role are cellular processes associated with numerous disease conditions such as but not limited to cancer, inflammatory diseases, abnormal angiogenesis and diseases related thereto, atherosclerosis, macular degeneration, diabetes, obesity, and pain.

[0006] Protein kinases have become attractive targets for the treatment of cancers. Fabbro *et al., Pharmacology & Therapeutics* 93:79-98 (2002). It has been proposed that the involvement of protein kinases in the development of human malignancies may occur by: (1) genomic rearrangements (e.g., BCR-ABL in chronic myelogenous leukemia), (2) mutations leading to constitutively active kinase activity, such as acute myelogenous leukemia and gastrointestinal tumors, (3) deregulation of kinase activity by activation of oncogenes or loss of tumor suppressor functions, such as in cancers with oncogenic RAS, (4) deregulation of kinase activity by over-expression, as in the case of EGFR and (5) ectopic expression of growth factors that can contribute to the development and maintenance of the neoplastic phenotype. Fabbro *et al., Pharmacology & Therapeutics* 93:79-98 (2002).

[0007] The elucidation of the intricacy of protein kinase pathways and the complexity of the relationship and interaction among and between the various protein kinases and kinase pathways highlights the importance of developing pharmaceutical agents capable of acting as protein kinase modulators, regulators or inhibitors that have beneficial activity on multiple kinases or multiple kinase pathways. Accordingly, there remains a need for new kinase modulators.

[0008] The protein named mTOR (mammalian target of rapamycin), which is also called FRAP, RAFTI or RAPT1), is a 2549-amino acid Ser/Thr protein kinase, that has been shown to be one of the most critical proteins in the mTOR/PI3K/Akt pathway that regulates cell growth and proliferation. Georgakis and Younes *Expert Rev. Anticancer Ther.* 6(1):131-140 (2006). mTOR exists within two complexes, mTORC1 and mTORC2. While mTORC1 is sensitive to rapamycin analogs (such as temsirolimus or everolimus), mTORC2 is largely rapamycin-insensitive. Notably, rapamycin is not a TOR kinase inhibitor. Several mTOR inhibitors have been or are being evaluated in clinical trials for the treatment of cancer. Temsirolimus was approved for use in renal cell carcinoma in 2007 and sirolimus was approved in 1999 for the prophylaxis of renal transplant rejection. Everolimus was approved in 2009 for renal cell carcinoma patients that have progressed on vascular endothelial growth factor receptor inhibitors, in 2010 for subependymal giant cell astrocytoma (SEGA) associated with tuberous sclerosis (TS) in patients who require therapy but are not candidates for surgical resection, and in 2011 for progressive neuroendocrine tumors of pancreatic origin (PNET) in patients with unresectable, locally advanced or metastatic disease. There remains a need for additional TOR kinase inhibitors.

[0009] DNA-dependent protein kinase (DNA-PK) is a serine/threonine kinase involved in the repair of DNA double strand breaks (DSBs). DSBs are considered to be the most lethal DNA lesion and occur endogenously or in response to ionizing radiation and chemotherapeutics (for review see Jackson, S. P., Bartek, J. The DNA-damage response in human biology and disease. *Nature Rev* 2009; 461:1071-1078). If left unrepaired, DSBs will lead to cell cycle arrest and/or cell death (Hoeijmakers, J. H. J. Genome maintenance mechanisms for preventing cancer. *Nature* 2001; 411: 366-374; van Gent, D. C., Hoeijmakers, J. H., Kanaar, R. Chromosomal stability and the DNA double-stranded break connection. *Nat Rev Genet* 2001; 2: 196-206). In response to the insult, cells have developed complex mechanisms to repair such breaks and these mechanisms may form the basis of therapeutic resistance. There are two major pathways used to repair DSBs, non-homologous end joining (NHEJ) and homologous recombination (HR). NHEJ brings broken ends of the DNA together and rejoins them without reference to a second template (Collis, S. J., DeWeese, T. L., Jeggo P. A., Parker, A.R. The life and death of DNA-PK. *Oncogene* 2005; 24: 949-961). In contrast, HR is dependent on the

proximity of the sister chromatid which provides a template to mediate faithful repair (Takata, M., Sasaki, M. S., Sonoda, E., Morrison, C., Hashimoto, M., Utsumi, H., et al. Homologous recombination and non-homologous end-joining pathways of DNA double-strand break repair have overlapping roles in the maintenance of chromosomal integrity in vertebrate cells. *EMBO J* 1998; 17: 5497-5508; Haber, J. E. Partners and pathways repairing a double-strand break. *Trends Genet* 2000; 16: 259-264). NHEJ repairs the majority of DSBs. In NHEJ, DSBs are recognized by the Ku protein that binds and then activates the catalytic subunit of DNA-PK. This leads to recruitment and activation of end-processing enzymes, polymerases and DNA ligase IV (Collis, S. J., DeWeese, T. L., Jeggo P. A., Parker, A.R. The life and death of DNA-PK. *Oncogene* 2005; 24: 949-961). NHEJ is primarily controlled by DNA-PK and thus inhibition of DNA-PK is an attractive approach to modulating the repair response to exogenously induced DSBs. Cells deficient in components of the NHEJ pathway are defective in DSB repair and highly sensitive to ionizing radiation and topoisomerase poisons (reviewed by Smith, G. C. M., Jackson, S.P. The DNA-dependent protein kinase. *Genes Dev* 1999; 13: 916-934; Jeggo, P.A., Caldecott, K., Pidsley, S., Banks, G.R. Sensitivity of Chinese hamster ovary mutants defective in DNA double strand break repair to topoisomerase II inhibitors. *Cancer Res* 1989; 49: 7057-7063). A DNA-PK inhibitor has been reported to have the same effect of sensitizing cancer cells to therapeutically induced DSBs (Smith, G. C. M., Jackson, S.P. The DNA-dependent protein kinase. *Genes Dev* 1999; 13: 916-934).

[0010] Citation or identification of any reference in Section 2 of this application is not to be construed as an admission that the reference is prior art to the present application.

3. SUMMARY

[0011] Provided herein are methods for treating or preventing head and neck squamous cell carcinoma (HNSCC) characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to a patient having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

[0012] In certain embodiments, provided herein are methods for achieving a Response Evaluation Criteria in Solid Tumors (for example, RECIST 1.1) of complete response, partial response or stable disease in a patient having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient.

[0013] In some embodiments, the HNSCC is characterized by deletion of all or part of chromosome 11q. In other embodiments, the HNSCC is characterized by deletion of chromosome 11q22. In others, the HNSCC is characterized by loss or mutation of the gene encoding ATM. In yet others, the HNSCC is characterized by loss of ATM expression or function.

[0014] In some embodiments, the Dihydropyrazino-Pyrazine Compound is a compound as described herein.

[0015] The present embodiments can be understood more fully by reference to the detailed description and examples, which are intended to exemplify non-limiting embodiments.

4. DETAILED DESCRIPTION

4.1 DEFINITIONS

[0016] An “alkyl” group is a saturated, partially saturated, or unsaturated straight chain or branched non-cyclic hydrocarbon having from 1 to 10 carbon atoms, typically from 1 to 8 carbons or, in some embodiments, from 1 to 6, 1 to 4, or 2 to 6 or carbon atoms. Representative alkyl groups include -methyl, -ethyl, -n-propyl, -n-butyl, -n-pentyl and -n-hexyl; while saturated branched alkyls include -isopropyl, -*sec*-butyl, -isobutyl, -*tert*-butyl, -isopentyl, 2-methylpentyl, 3-methylpentyl, 4-methylpentyl, 2,3-dimethylbutyl and the like. Examples of unsaturated alkyl groups include, but are not limited to, vinyl, allyl, -CH=CH(CH₃), -CH=C(CH₃)₂, -C(CH₃)=CH₂, -C(CH₃)=CH(CH₃), -C(CH₂CH₃)=CH₂, -C≡CH, -C≡C(CH₃), -C≡C(CH₂CH₃), -CH₂C≡CH, -CH₂C≡C(CH₃) and -CH₂C≡C(CH₂CH₃), among others. An alkyl group can be substituted or unsubstituted. In certain embodiments, when the alkyl groups described herein are said to be “substituted,” they may be substituted with any substituent or substituents as those found in the exemplary compounds and embodiments disclosed herein, as well as halogen (chloro, iodo,

bromo, or fluoro); hydroxyl; alkoxy; alkoxyalkyl; amino; alkylamino; carboxy; nitro; cyano; thiol; thioether; imine; imide; amidine; guanidine; enamine; aminocarbonyl; acylamino; phosphonato; phosphine; thiocarbonyl; sulfonyl; sulfone; sulfonamide; ketone; aldehyde; ester; urea; urethane; oxime; hydroxyl amine; alkoxyamine; aralkoxyamine; N-oxide; hydrazine; hydrazide; hydrazone; azide; isocyanate; isothiocyanate; cyanate; thiocyanate; B(OH)₂, or O(alkyl)aminocarbonyl.

[0017] An “alkenyl” group is a straight chain or branched non-cyclic hydrocarbon having from 2 to 10 carbon atoms, typically from 2 to 8 carbon atoms, and including at least one carbon-carbon double bond. Representative straight chain and branched (C₂-C₈) alkenyls include -vinyl, -allyl, -1-butenyl, -2-butenyl, -isobutylenyl, -1-pentenyl, -2-pentenyl, -3-methyl-1-butenyl, -2-methyl-2-butenyl, -2,3-dimethyl-2-butenyl, -1-hexenyl, -2-hexenyl, -3-hexenyl, -1-heptenyl, -2-heptenyl, -3-heptenyl, -1-octenyl, -2-octenyl, -3-octenyl and the like. The double bond of an alkenyl group can be unconjugated or conjugated to another unsaturated group. An alkenyl group can be unsubstituted or substituted.

[0018] A “cycloalkyl” group is a saturated, or partially saturated cyclic alkyl group of from 3 to 10 carbon atoms having a single cyclic ring or multiple condensed or bridged rings which can be optionally substituted with from 1 to 3 alkyl groups. In some embodiments, the cycloalkyl group has 3 to 8 ring members, whereas in other embodiments the number of ring carbon atoms ranges from 3 to 5, 3 to 6, or 3 to 7. Such cycloalkyl groups include, by way of example, single ring structures such as cyclopropyl, cyclobutyl, cyclopentyl, cyclohexyl, cycloheptyl, cyclooctyl, 1-methylcyclopropyl, 2-methylcyclopentyl, 2-methylcyclooctyl, and the like, or multiple or bridged ring structures such as adamantyl and the like. Examples of unsaturated cycloalkyl groups include cyclohexenyl, cyclopentenyl, cyclohexadienyl, butadienyl, pentadienyl, hexadienyl, among others. A cycloalkyl group can be substituted or unsubstituted. Such substituted cycloalkyl groups include, by way of example, cyclohexanone and the like.

[0019] An “aryl” group is an aromatic carbocyclic group of from 6 to 14 carbon atoms having a single ring (*e.g.*, phenyl) or multiple condensed rings (*e.g.*, naphthyl or anthryl). In some embodiments, aryl groups contain 6-14 carbons, and in others from 6 to 12 or even 6 to 10 carbon atoms in the ring portions of the groups. Particular aryls include phenyl, biphenyl, naphthyl and the like. An aryl group can be substituted or unsubstituted. The phrase “aryl

groups” also includes groups containing fused rings, such as fused aromatic-aliphatic ring systems (e.g., indanyl, tetrahydronaphthyl, and the like).

[0020] A “heteroaryl” group is an aryl ring system having one to four heteroatoms as ring atoms in a heteroaromatic ring system, wherein the remainder of the atoms are carbon atoms. In some embodiments, heteroaryl groups contain 5 to 6 ring atoms, and in others from 6 to 9 or even 6 to 10 atoms in the ring portions of the groups. Suitable heteroatoms include oxygen, sulfur and nitrogen. In certain embodiments, the heteroaryl ring system is monocyclic or bicyclic. Non-limiting examples include but are not limited to, groups such as pyrrolyl, pyrazolyl, imidazolyl, triazolyl, tetrazolyl, oxazolyl, isoxazolyl, thiazolyl, pyrrolyl, pyridyl, pyridazinyl, pyrimidinyl, pyrazinyl, thiophenyl, benzothiophenyl, furanyl, benzofuranyl (for example, isobenzofuran-1,3-diimine), indolyl, azaindolyl (for example, pyrrolopyridyl or 1H-pyrrolo[2,3-b]pyridyl), indazolyl, benzimidazolyl (for example, 1H-benzo[d]imidazolyl), imidazopyridyl (for example, azabenzimidazolyl, 3H-imidazo[4,5-b]pyridyl or 1H-imidazo[4,5-b]pyridyl), pyrazolopyridyl, triazolopyridyl, benzotriazolyl, benzoxazolyl, benzothiazolyl, benzothiadiazolyl, isoxazolopyridyl, thianaphthalenyl, purinyl, xanthinyl, adeninyl, guaninyl, quinolinyl, isoquinolinyl, tetrahydroquinolinyl, quinoxalinyl, and quinazolinyl groups.

[0021] A “heterocyclyl” is an aromatic (also referred to as heteroaryl) or non-aromatic cycloalkyl in which one to four of the ring carbon atoms are independently replaced with a heteroatom from the group consisting of O, S and N. In some embodiments, heterocyclyl groups include 3 to 10 ring members, whereas other such groups have 3 to 5, 3 to 6, or 3 to 8 ring members. Heterocyclyls can also be bonded to other groups at any ring atom (*i.e.*, at any carbon atom or heteroatom of the heterocyclic ring). A heterocyclylalkyl group can be substituted or unsubstituted. Heterocyclyl groups encompass unsaturated, partially saturated and saturated ring systems, such as, for example, imidazolyl, imidazolyl and imidazolidinyl groups. The phrase heterocyclyl includes fused ring species, including those comprising fused aromatic and non-aromatic groups, such as, for example, benzotriazolyl, 2,3-dihydrobenzo[1,4]dioxinyl, and benzo[1,3]dioxolyl. The phrase also includes bridged polycyclic ring systems containing a heteroatom such as, but not limited to, quinuclidyl. Representative examples of a heterocyclyl group include, but are not limited to, aziridinyl, azetidiny, pyrrolidinyl, imidazolidinyl, pyrazolidinyl, thiazolidinyl, tetrahydrothiophenyl, tetrahydrofuranyl, dioxolyl, furanyl,

thiophenyl, pyrrolyl, pyrrolinyl, imidazolyl, imidazolynyl, pyrazolyl, pyrazolynyl, triazolyl, tetrazolyl, oxazolyl, isoxazolyl, thiazolyl, thiazolynyl, isothiazolyl, thiadiazolyl, oxadiazolyl, piperidyl, piperazinyl, morpholynyl, thiomorpholynyl, tetrahydropyranyl (for example, tetrahydro-2H-pyranyl), tetrahydrothiopyranyl, oxathiane, dioxyl, dithianyl, pyranyl, pyridyl, pyrimidinyl, pyridazinyl, pyrazinyl, triazinyl, dihydropyridyl, dihydrodithiinyl, dihydrodithionyl, homopiperazinyl, quinuclidyl, indolyl, indolynyl, isoindolyl, azaindolyl (pyrrolopyridyl), indazolyl, indolizinyl, benzotriazolyl, benzimidazolyl, benzofuranyl, benzothiophenyl, benzthiazolyl, benzoxadiazolyl, benzoxazinyl, benzodithiinyl, benzoxathiinyl, benzothiazinyl, benzoxazolyl, benzothiazolyl, benzothiadiazolyl, benzo[1,3]dioxolyl, pyrazolopyridyl, imidazopyridyl (azabenzimidazolyl; for example, 1H-imidazo[4,5-b]pyridyl, or 1H-imidazo[4,5-b]pyridin-2(3H)-onyl), triazolopyridyl, isoxazolopyridyl, purinyl, xanthinyl, adeninyl, guaninyl, quinolynyl, isoquinolynyl, quinolizinyl, quinoxalinyl, quinazolynyl, cinnolynyl, phthalazinyl, naphthyridinyl, pteridinyl, thianaphthalenyl, dihydrobenzothiazinyl, dihydrobenzofuranyl, dihydroindolyl, dihydrobenzodioxinyl, tetrahydroindolyl, tetrahydroindazolyl, tetrahydrobenzimidazolyl, tetrahydrobenzotriazolyl, tetrahydropyrrolopyridyl, tetrahydropyrazolopyridyl, tetrahydroimidazopyridyl, tetrahydrotriazolopyridyl, and tetrahydroquinolynyl groups. Representative substituted heterocyclyl groups may be mono-substituted or substituted more than once, such as, but not limited to, pyridyl or morpholynyl groups, which are 2-, 3-, 4-, 5-, or 6-substituted, or disubstituted with various substituents such as those listed below.

[0022] A “cycloalkylalkyl” group is a radical of the formula: -alkyl-cycloalkyl, wherein alkyl and cycloalkyl are defined above. Substituted cycloalkylalkyl groups may be substituted at the alkyl, the cycloalkyl, or both the alkyl and the cycloalkyl portions of the group.

Representative cycloalkylalkyl groups include but are not limited to cyclopentylmethyl, cyclopentylethyl, cyclohexylmethyl, cyclohexylethyl, and cyclohexylpropyl. Representative substituted cycloalkylalkyl groups may be mono- substituted or substituted more than once.

[0023] An “aralkyl” group is a radical of the formula: -alkyl-aryl, wherein alkyl and aryl are defined above. Substituted aralkyl groups may be substituted at the alkyl, the aryl, or both the alkyl and the aryl portions of the group. Representative aralkyl groups include but are not

limited to benzyl and phenethyl groups and fused (cycloalkylaryl)alkyl groups such as 4-ethyl-indanyl.

[0024] A “heterocyclalkyl” group is a radical of the formula: -alkyl-heterocycl, wherein alkyl and heterocycl are defined above. Substituted heterocyclalkyl groups may be substituted at the alkyl, the heterocycl, or both the alkyl and the heterocycl portions of the group. Representative heterocyclalkyl groups include but are not limited to 4-ethyl-morpholinyl, 4-propylmorpholinyl, furan-2-yl methyl, furan-3-yl methyl, pyridine-3-yl methyl, (tetrahydro-2H-pyran-4-yl)methyl, (tetrahydro-2H-pyran-4-yl)ethyl, tetrahydrofuran-2-yl methyl, tetrahydrofuran-2-yl ethyl, and indol-2-yl propyl.

[0025] A “halogen” is chloro, iodo, bromo, or fluoro.

[0026] A “hydroxyalkyl” group is an alkyl group as described above substituted with one or more hydroxy groups.

[0027] An “alkoxy” group is -O-(alkyl), wherein alkyl is defined above.

[0028] An “alkoxyalkyl” group is -(alkyl)-O-(alkyl), wherein alkyl is defined above.

[0029] An “amine” group is a radical of the formula: -NH₂.

[0030] A “hydroxyl amine” group is a radical of the formula: -N(R[#])OH or -NHOH, wherein R[#] is a substituted or unsubstituted alkyl, cycloalkyl, cycloalkylalkyl, aryl, aralkyl, heterocycl or heterocyclalkyl group as defined herein.

[0031] An “alkoxyamine” group is a radical of the formula: -N(R[#])O-alkyl or -NHO-alkyl, wherein R[#] is as defined above.

[0032] An “aralkoxyamine” group is a radical of the formula: -N(R[#])O-aryl or -NHO-aryl, wherein R[#] is as defined above.

[0033] An “alkylamine” group is a radical of the formula: -NH-alkyl or -N(alkyl)₂, wherein each alkyl is independently as defined above.

[0034] An “aminocarbonyl” group is a radical of the formula: -C(=O)N(R[#])₂, -C(=O)NH(R[#]) or -C(=O)NH₂, wherein each R[#] is as defined above.

[0035] An “acylamino” group is a radical of the formula: -NHC(=O)(R[#]) or -N(alkyl)C(=O)(R[#]), wherein each alkyl and R[#] are independently as defined above.

- [0036] An “O(alkyl)aminocarbonyl” group is a radical of the formula: $-O(alkyl)C(=O)N(R^{\#})_2$, $-O(alkyl)C(=O)NH(R^{\#})$ or $-O(alkyl)C(=O)NH_2$, wherein each $R^{\#}$ is independently as defined above.
- [0037] An “N-oxide” group is a radical of the formula: $-N^+-O^-$.
- [0038] A “carboxy” group is a radical of the formula: $-C(=O)OH$.
- [0039] A “ketone” group is a radical of the formula: $-C(=O)(R^{\#})$, wherein $R^{\#}$ is as defined above.
- [0040] An “aldehyde” group is a radical of the formula: $-CH(=O)$.
- [0041] An “ester” group is a radical of the formula: $-C(=O)O(R^{\#})$ or $-OC(=O)(R^{\#})$, wherein $R^{\#}$ is as defined above.
- [0042] A “urea” group is a radical of the formula: $-N(alkyl)C(=O)N(R^{\#})_2$, $N(alkyl)C(=O)NH(R^{\#})$, $-N(alkyl)C(=O)NH_2$, $-NHC(=O)N(R^{\#})_2$, $-NHC(=O)NH(R^{\#})$, or $-NHC(=O)NH_2$, wherein each alkyl and $R^{\#}$ are independently as defined above.
- [0043] An “imine” group is a radical of the formula: $-N=C(R^{\#})_2$ or $-C(R^{\#})=N(R^{\#})$, wherein each $R^{\#}$ is independently as defined above.
- [0044] An “imide” group is a radical of the formula: $-C(=O)N(R^{\#})C(=O)(R^{\#})$ or $-N((C=O)(R^{\#}))_2$, wherein each $R^{\#}$ is independently as defined above.
- [0045] A “urethane” group is a radical of the formula: $-OC(=O)N(R^{\#})_2$, $-OC(=O)NH(R^{\#})$, $-N(R^{\#})C(=O)O(R^{\#})$, or $-NHC(=O)O(R^{\#})$, wherein each $R^{\#}$ is independently as defined above.
- [0046] An “amidine” group is a radical of the formula: $-C(=N(R^{\#}))N(R^{\#})_2$, $-C(=N(R^{\#}))NH(R^{\#})$, $-C(=N(R^{\#}))NH_2$, $-C(=NH)N(R^{\#})_2$, $-C(=NH)NH(R^{\#})$, $-C(=NH)NH_2$, $-N=C(R^{\#})N(R^{\#})_2$, $-N=C(R^{\#})NH(R^{\#})$, $-N=C(R^{\#})NH_2$, $-N(R^{\#})C(R^{\#})=N(R^{\#})$, $-NHC(R^{\#})=N(R^{\#})$, $-N(R^{\#})C(R^{\#})=NH$, or $-NHC(R^{\#})=NH$, wherein each $R^{\#}$ is independently as defined above.
- [0047] A “guanidine” group is a radical of the formula: $-N(R^{\#})C(=N(R^{\#}))N(R^{\#})_2$, $-NHC(=N(R^{\#}))N(R^{\#})_2$, $-N(R^{\#})C(=NH)N(R^{\#})_2$, $-N(R^{\#})C(=N(R^{\#}))NH(R^{\#})$, $-N(R^{\#})C(=N(R^{\#}))NH_2$, $-NHC(=NH)N(R^{\#})_2$, $-NHC(=N(R^{\#}))NH(R^{\#})$, $-NHC(=N(R^{\#}))NH_2$, $-NHC(=NH)NH(R^{\#})$, $-NHC(=NH)NH_2$, $-N=C(N(R^{\#})_2)_2$, $-N=C(NH(R^{\#}))_2$, or $-N=C(NH_2)_2$, wherein each $R^{\#}$ is independently as defined above.
- [0048] A “enamine” group is a radical of the formula: $-N(R^{\#})C(R^{\#})=C(R^{\#})_2$, $-NHC(R^{\#})=C(R^{\#})_2$, $-C(N(R^{\#})_2)=C(R^{\#})_2$, $-C(NH(R^{\#}))=C(R^{\#})_2$, $-C(NH_2)=C(R^{\#})_2$,

$-C(R^{\#})=C(R^{\#})(N(R^{\#})_2)$, $-C(R^{\#})=C(R^{\#})(NH(R^{\#}))$ or $-C(R^{\#})=C(R^{\#})(NH_2)$, wherein each $R^{\#}$ is independently as defined above.

[0049] An “oxime” group is a radical of the formula: $-C(=NO(R^{\#}))(R^{\#})$, $-C(=NOH)(R^{\#})$, $-CH(=NO(R^{\#}))$, or $-CH(=NOH)$, wherein each $R^{\#}$ is independently as defined above.

[0050] A “hydrazide” group is a radical of the formula: $-C(=O)N(R^{\#})N(R^{\#})_2$, $-C(=O)NHN(R^{\#})_2$, $-C(=O)N(R^{\#})NH(R^{\#})$, $-C(=O)N(R^{\#})NH_2$, $-C(=O)NHNH(R^{\#})_2$, or $-C(=O)NHNH_2$, wherein each $R^{\#}$ is independently as defined above.

[0051] A “hydrazine” group is a radical of the formula: $-N(R^{\#})N(R^{\#})_2$, $-NHN(R^{\#})_2$, $-N(R^{\#})NH(R^{\#})$, $-N(R^{\#})NH_2$, $-NHNH(R^{\#})_2$, or $-NHNH_2$, wherein each $R^{\#}$ is independently as defined above.

[0052] A “hydrazone” group is a radical of the formula: $-C(=N-N(R^{\#})_2)(R^{\#})_2$, $-C(=N-NH(R^{\#}))(R^{\#})_2$, $-C(=N-NH_2)(R^{\#})_2$, $-N(R^{\#})(N=C(R^{\#})_2)$, or $-NH(N=C(R^{\#})_2)$, wherein each $R^{\#}$ is independently as defined above.

[0053] An “azide” group is a radical of the formula: $-N_3$.

[0054] An “isocyanate” group is a radical of the formula: $-N=C=O$.

[0055] An “isothiocyanate” group is a radical of the formula: $-N=C=S$.

[0056] A “cyanate” group is a radical of the formula: $-OCN$.

[0057] A “thiocyanate” group is a radical of the formula: $-SCN$.

[0058] A “thioether” group is a radical of the formula; $-S(R^{\#})$, wherein $R^{\#}$ is as defined above.

[0059] A “thiocarbonyl” group is a radical of the formula: $-C(=S)(R^{\#})$, wherein $R^{\#}$ is as defined above.

[0060] A “sulfinyl” group is a radical of the formula: $-S(=O)(R^{\#})$, wherein $R^{\#}$ is as defined above.

[0061] A “sulfone” group is a radical of the formula: $-S(=O)_2(R^{\#})$, wherein $R^{\#}$ is as defined above.

[0062] A “sulfonylamino” group is a radical of the formula: $-NH SO_2(R^{\#})$ or $-N(alkyl)SO_2(R^{\#})$, wherein each alkyl and $R^{\#}$ are defined above.

[0063] A “sulfonamide” group is a radical of the formula: $-S(=O)_2N(R^{\#})_2$, or $-S(=O)_2NH(R^{\#})$, or $-S(=O)_2NH_2$, wherein each $R^{\#}$ is independently as defined above.

[0064] A “phosphonate” group is a radical of the formula: $-P(=O)(O(R^{\#}))_2$, $-P(=O)(OH)_2$, $-OP(=O)(O(R^{\#}))(R^{\#})$, or $-OP(=O)(OH)(R^{\#})$, wherein each $R^{\#}$ is independently as defined above.

[0065] A “phosphine” group is a radical of the formula: $-P(R^{\#})_2$, wherein each $R^{\#}$ is independently as defined above.

[0066] When the groups described herein, with the exception of alkyl group are said to be “substituted,” they may be substituted with any appropriate substituent or substituents.

Illustrative examples of substituents are those found in the exemplary compounds and embodiments disclosed herein, as well as halogen (chloro, iodo, bromo, or fluoro); alkyl; hydroxyl; alkoxy; alkoxyalkyl; amino; alkylamino; carboxy; nitro; cyano; thiol; thioether; imine; imide; amidine; guanidine; enamine; aminocarbonyl; acylamino; phosphonate; phosphine; thiocarbonyl; sulfinyl; sulfone; sulfonamide; ketone; aldehyde; ester; urea; urethane; oxime; hydroxyl amine; alkoxyamine; aralkoxyamine; N-oxide; hydrazine; hydrazide; hydrazone; azide; isocyanate; isothiocyanate; cyanate; thiocyanate; oxygen ($=O$); $B(OH)_2$, $O(alkyl)aminocarbonyl$; cycloalkyl, which may be monocyclic or fused or non-fused polycyclic (*e.g.*, cyclopropyl, cyclobutyl, cyclopentyl, or cyclohexyl), or a heterocyclyl, which may be monocyclic or fused or non-fused polycyclic (*e.g.*, pyrrolidyl, piperidyl, piperazinyl, morpholinyl, or thiazinyl); monocyclic or fused or non-fused polycyclic aryl or heteroaryl (*e.g.*, phenyl, naphthyl, pyrrolyl, indolyl, furanyl, thiophenyl, imidazolyl, oxazolyl, isoxazolyl, thiazolyl, triazolyl, tetrazolyl, pyrazolyl, pyridinyl, quinolinyl, isoquinolinyl, acridinyl, pyrazinyl, pyridazinyl, pyrimidinyl, benzimidazolyl, benzothiophenyl, or benzofuranyl) aryloxy; aralkyloxy; heterocyclyloxy; and heterocyclyl alkoxy.

[0067] As used herein, the term “pharmaceutically acceptable salt(s)” refers to a salt prepared from a pharmaceutically acceptable non-toxic acid or base including an inorganic acid and base and an organic acid and base. Suitable pharmaceutically acceptable base addition salts of the Dihydropyrazino-Pyrazine Compound include, but are not limited to metallic salts made from aluminum, calcium, lithium, magnesium, potassium, sodium and zinc or organic salts made from lysine, N,N'-dibenzylethylenediamine, chlorprocaine, choline, diethanolamine, ethylenediamine, meglumine (N-methylglucamine) and procaine. Suitable non-toxic acids include, but are not limited to, inorganic and organic acids such as acetic, alginic, anthranilic, benzenesulfonic, benzoic, camphorsulfonic, citric, ethenesulfonic, formic, fumaric, furoic,

galacturonic, gluconic, glucuronic, glutamic, glycolic, hydrobromic, hydrochloric, isethionic, lactic, maleic, malic, mandelic, methanesulfonic, mucic, nitric, pamoic, pantothenic, phenylacetic, phosphoric, propionic, salicylic, stearic, succinic, sulfanilic, sulfuric, tartaric acid, and p-toluenesulfonic acid. Specific non-toxic acids include hydrochloric, hydrobromic, phosphoric, sulfuric, and methanesulfonic acids. Examples of specific salts thus include hydrochloride and mesylate salts. Others are well-known in the art, see for example, *Remington's Pharmaceutical Sciences*, 18th eds., Mack Publishing, Easton PA (1990) or *Remington: The Science and Practice of Pharmacy*, 19th eds., Mack Publishing, Easton PA (1995).

[0068] As used herein and unless otherwise indicated, the term “clathrate” means a Dihydropyrazino-Pyrazine Compound, or a salt thereof, in the form of a crystal lattice that contains spaces (*e.g.*, channels) that have a guest molecule (*e.g.*, a solvent or water) trapped within or a crystal lattice wherein a Dihydropyrazino-Pyrazine Compound is a guest molecule.

[0069] As used herein and unless otherwise indicated, the term “solvate” means a Dihydropyrazino-Pyrazine Compound, or a salt thereof, that further includes a stoichiometric or non-stoichiometric amount of a solvent bound by non-covalent intermolecular forces. In one embodiment, the solvate is a hydrate.

[0070] As used herein and unless otherwise indicated, the term “hydrate” means a Dihydropyrazino-Pyrazine Compound, or a salt thereof, that further includes a stoichiometric or non-stoichiometric amount of water bound by non-covalent intermolecular forces.

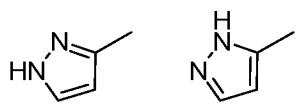
[0071] As used herein and unless otherwise indicated, the term “prodrug” means a Dihydropyrazino-Pyrazine Compound derivative that can hydrolyze, oxidize, or otherwise react under biological conditions (*in vitro* or *in vivo*) to provide an active compound, particularly a Dihydropyrazino-Pyrazine Compound. Examples of prodrugs include, but are not limited to, derivatives and metabolites of a Dihydropyrazino-Pyrazine Compound that include biohydrolyzable moieties such as biohydrolyzable amides, biohydrolyzable esters, biohydrolyzable carbamates, biohydrolyzable carbonates, biohydrolyzable ureides, and biohydrolyzable phosphate analogues. In certain embodiments, prodrugs of compounds with carboxyl functional groups are the lower alkyl esters of the carboxylic acid. The carboxylate esters are conveniently formed by esterifying any of the carboxylic acid moieties present on the

molecule. Prodrugs can typically be prepared using well-known methods, such as those described by *Burger's Medicinal Chemistry and Drug Discovery* 6th ed. (Donald J. Abraham *ed.*, 2001, Wiley) and *Design and Application of Prodrugs* (H. Bundgaard *ed.*, 1985, Harwood Academic Publishers Gmhf).

[0072] As used herein and unless otherwise indicated, the term “stereoisomer” or “stereomerically pure” means one stereoisomer of a Dihydropyrazino-Pyrazine Compound that is substantially free of other stereoisomers of that compound. For example, a stereomerically pure compound having one chiral center will be substantially free of the opposite enantiomer of the compound. A stereomerically pure compound having two chiral centers will be substantially free of other diastereomers of the compound. A typical stereomerically pure compound comprises greater than about 80% by weight of one stereoisomer of the compound and less than about 20% by weight of other stereoisomers of the compound, greater than about 90% by weight of one stereoisomer of the compound and less than about 10% by weight of the other stereoisomers of the compound, greater than about 95% by weight of one stereoisomer of the compound and less than about 5% by weight of the other stereoisomers of the compound, or greater than about 97% by weight of one stereoisomer of the compound and less than about 3% by weight of the other stereoisomers of the compound. The Dihydropyrazino-Pyrazine Compounds can have chiral centers and can occur as racemates, individual enantiomers or diastereomers, and mixtures thereof. All such isomeric forms are included within the embodiments disclosed herein, including mixtures thereof. The use of stereomerically pure forms of such Dihydropyrazino-Pyrazine Compounds, as well as the use of mixtures of those forms are encompassed by the embodiments disclosed herein. For example, mixtures comprising equal or unequal amounts of the enantiomers of a particular Dihydropyrazino-Pyrazine Compound may be used in methods and compositions disclosed herein. These isomers may be asymmetrically synthesized or resolved using standard techniques such as chiral columns or chiral resolving agents. *See, e.g.,* Jacques, J., *et al.*, *Enantiomers, Racemates and Resolutions* (Wiley-Interscience, New York, 1981); Wilen, S. H., *et al.*, *Tetrahedron* 33:2725 (1977); Eliel, E. L., *Stereochemistry of Carbon Compounds* (McGraw-Hill, NY, 1962); and Wilen, S. H., *Tables of Resolving Agents and Optical Resolutions* p. 268 (E.L. Eliel, Ed., Univ. of Notre Dame Press, Notre Dame, IN, 1972).

[0073] It should also be noted the Dihydropyrazino-Pyrazine Compounds can include E and Z isomers, or a mixture thereof, and cis and trans isomers or a mixture thereof. In certain embodiments, the Dihydropyrazino-Pyrazine Compounds are isolated as either the cis or trans isomer. In other embodiments, the Dihydropyrazino-Pyrazine Compounds are a mixture of the cis and trans isomers.

[0074] “Tautomers” refers to isomeric forms of a compound that are in equilibrium with each other. The concentrations of the isomeric forms will depend on the environment the compound is found in and may be different depending upon, for example, whether the compound is a solid or is in an organic or aqueous solution. For example, in aqueous solution, pyrazoles may exhibit the following isomeric forms, which are referred to as tautomers of each other:



[0075] As readily understood by one skilled in the art, a wide variety of functional groups and other structures may exhibit tautomerism and all tautomers of the Dihydropyrazino-Pyrazine Compounds are within the scope of the present invention.

[0076] It should also be noted the Dihydropyrazino-Pyrazine Compounds can contain unnatural proportions of atomic isotopes at one or more of the atoms. For example, the compounds may be radiolabeled with radioactive isotopes, such as for example tritium (^3H), iodine-125 (^{125}I), sulfur-35 (^{35}S), or carbon-14 (^{14}C), or may be isotopically enriched, such as with deuterium (^2H), carbon-13 (^{13}C), or nitrogen-15 (^{15}N). As used herein, an “isotopologue” is an isotopically enriched compound. The term “isotopically enriched” refers to an atom having an isotopic composition other than the natural isotopic composition of that atom. “Isotopically enriched” may also refer to a compound containing at least one atom having an isotopic composition other than the natural isotopic composition of that atom. The term “isotopic composition” refers to the amount of each isotope present for a given atom. Radiolabeled and isotopically enriched compounds are useful as therapeutic agents, e.g., cancer and inflammation therapeutic agents, research reagents, e.g., binding assay reagents, and diagnostic agents, e.g., in vivo imaging agents. All isotopic variations of the Dihydropyrazino-Pyrazine Compounds as described herein, whether radioactive or not, are intended to be encompassed within the scope of

the embodiments provided herein. In some embodiments, there are provided isotopologues of the Dihydropyrazino-Pyrazine Compounds, for example, the isotopologues are deuterium, carbon-13, or nitrogen-15 enriched Dihydropyrazino-Pyrazine Compounds.

[0077] It should be noted that if there is a discrepancy between a depicted structure and a name for that structure, the depicted structure is to be accorded more weight.

[0078] The term “ATM” as used herein, refers to Ataxia Telangiectasia Mutated (ATM), a serine/threonine protein kinase that is recruited and activated by DNA double-strand breaks. ATM phosphorylates several key proteins that initiate activation of the DNA damage checkpoint, leading to cell cycle arrest, DNA repair or apoptosis. Several of these targets, including p53, CHK2 and H2AX are tumor suppressors. The ATM gene codes for a 350 kDa protein consisting of 3056 amino acids.

[0079] The term, “deletion of 11q” or “del11q22” as used herein, refers to deletion of all or part of the long arm of chromosome 11 containing the ATM gene within tumor cells.

[0080] “Treating” as used herein, means an alleviation, in whole or in part, of HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, or a symptom thereof, or slowing, or halting of further progression or worsening of HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, or a symptom thereof. In some embodiments, the HNSCC is characterized by deletion of all or part of chromosome 11q. In other embodiments, the HNSCC is characterized by deletion of chromosome 11q22. In others, the HNSCC is characterized by loss or mutation of the gene encoding ATM. In yet others, the HNSCC is characterized by loss of ATM expression or function.

[0081] “Preventing” as used herein, means the prevention of the onset, recurrence or spread, in whole or in part, of HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, or a symptom thereof. In some embodiments, the HNSCC is characterized by deletion of all or part of chromosome 11q. In other embodiments, the HNSCC is characterized by deletion of chromosome 11q22. In others, the HNSCC is characterized by loss or mutation of the gene

encoding ATM. In yet others, the HNSCC is characterized by loss of ATM expression or function.

[0082] The term “effective amount” in connection with a Dihydropyrazino-Pyrazine Compound means an amount capable of alleviating, in whole or in part, symptoms associated with HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, or slowing or halting further progression or worsening of those symptoms, or treating or preventing HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. The effective amount of the Dihydropyrazino-Pyrazine Compound, for example in a pharmaceutical composition, may be at a level that will exercise the desired effect; for example, about 0.005 mg/kg of a subject’s body weight to about 100 mg/kg of a patient’s body weight in unit dosage for both oral and parenteral administration. As will be apparent to those skilled in the art, it is to be expected that the effective amount of a Dihydropyrazino-Pyrazine Compound disclosed herein may vary depending on the severity of the indication being treated. In some embodiments, the HNSCC is characterized by deletion of all or part of chromosome 11q. In other embodiments, the HNSCC is characterized by deletion of chromosome 11q22. In others, the HNSCC is characterized by loss or mutation of the gene encoding ATM. In yet others, the HNSCC is characterized by loss of ATM expression or function.

[0083] The terms “patient” and “subject” as used herein include an animal, including, but not limited to, an animal such as a cow, monkey, horse, sheep, pig, chicken, turkey, quail, cat, dog, mouse, rat, rabbit or guinea pig, in one embodiment a mammal, in another embodiment a human. In one embodiment, a “patient” or “subject” is a human having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. In one embodiment, a patient is a human having histologically or cytologically-confirmed HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, including subjects who have progressed on (or not been able to tolerate) standard anticancer therapy or for whom no standard anticancer therapy exists. In one embodiment, the patient is a human having HNSCC characterized by deletion of chromosome 11q22. In another

embodiment, the patient is a human having HNSCC characterized by loss of ATM expression. In one embodiment, the patient is a human having HNSCC characterized by deletion of chromosome 11q22 measured by fluorescence *in situ* hybridization (FISH). In another embodiment, the patient is a human having HNSCC characterized by loss of ATM expression measured by immunohistochemistry (IHC) or Western Blot. In one embodiment, the patient is a human having HNSCC characterized by deletion of all or part of chromosome 11q, measured by fluorescence in situ hybridization (FISH) or gene sequencing. In another embodiment, the patient is a human having HNSCC characterized by loss of the gene encoding ATM measured by FISH. In another embodiment, the patient is a human having HNSCC characterized by mutation of the gene encoding ATM measured by gene sequencing. In another embodiment, the patient is a human having HNSCC characterized by loss of ATM expression measured by immunohistochemistry (IHC) or Western Blot. In another embodiment, the patient is a human having HNSCC characterized by ATM function loss due to mutation, measured by sequencing. In another embodiment, the patient is a human having HNSCC characterized by deletion of all or part of chromosome 11q. In another embodiment, the patient is a human having HNSCC characterized by deletion of chromosome 11q22. In another embodiment, the patient is a human having HNSCC characterized by loss or mutation of the gene encoding ATM. In another embodiment, the patient is a human having HNSCC characterized by loss of ATM expression or function.

[0084] In the context of HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, treatment may be assessed by inhibition of disease progression, inhibition of tumor growth, reduction of primary and/or secondary tumor(s), relief of tumor-related symptoms, improvement in quality of life, delayed appearance of primary and/or secondary tumor(s), slowed development of primary and/or secondary tumor(s), decreased occurrence of primary and/or secondary tumor(s), slowed or decreased severity of secondary effects of disease, arrested tumor growth and/or regression of tumors, among others. In certain embodiments, treatment of HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, may be assessed by the inhibition of phosphorylation of S6RP, 4E-BP1 and/or AKT in circulating blood and/or tumor cells and/or

skin biopsies or tumor biopsies/aspirates, before, during and/or after treatment with a Dihydropyrazino-Pyrazine Compound. In other embodiments, treatment of HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, may be assessed by the inhibition of DNA-dependent protein kinase (DNA-PK) activity in skin samples and/or tumor biopsies/aspirates, such as by assessment of the amount of pDNA-PK S2056 as a biomarker for DNA damage pathways, before, during, and/or after Dihydropyrazino-Pyrazine Compound treatment. In one embodiment, the skin sample is irradiated by UV light. In the extreme, complete inhibition, is referred to herein as prevention or chemoprevention. In this context, the term "prevention" includes either preventing the onset of clinically evident HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, altogether or preventing the onset of a preclinically evident stage of HNSCC carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. Also intended to be encompassed by this definition is the prevention of transformation into malignant cells or to arrest or reverse the progression of premalignant cells to malignant cells. This includes prophylactic treatment of those at risk of developing HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

[0085] In certain embodiments, treatment of a cancer may be assessed by the inhibition of phosphorylation of S6RP, 4E-BP1, AKT and/or DNA-PK in circulating blood and/or tumor cells, and/or skin biopsies or tumor biopsies/aspirates, before, during and/or after treatment with a TOR kinase inhibitor, for example, a Dihydropyrazino-Pyrazine Compound. For example, the inhibition of phosphorylation of S6RP, 4E-BP1, AKT and/or DNA-PK is assessed in B-cells, T-cells and/or monocytes.

[0086] In other embodiments, treatment of a cancer may be assessed by the inhibition of DNA-dependent protein kinase (DNA-PK) activity in skin samples and/or tumor biopsies/aspirates, such as by assessment of the amount of pDNA-PK S2056 as a biomarker for DNA damage pathways, before, during, and/or after TOR kinase inhibitor treatment, for

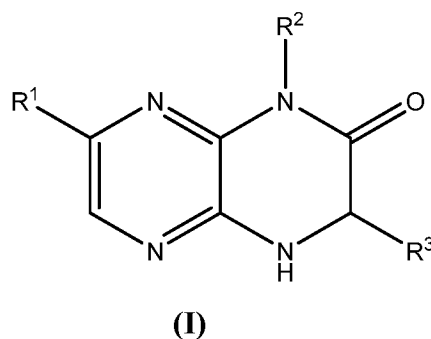
example, Dihydropyrazino-Pyrazine Compound treatment. In one embodiment, the skin sample is irradiated by UV light.

[0087] In the extreme, complete inhibition, is referred to herein as prevention or chemoprevention. In this context, the term “prevention” includes either preventing the onset of clinically evident HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, altogether or preventing the onset of a preclinically evident stage of HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. Also intended to be encompassed by this definition is the prevention of transformation into malignant cells or to arrest or reverse the progression of premalignant cells to malignant cells. This includes prophylactic treatment of those at risk of developing HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

4.2 DIHYDROPYRAZINO-PYRAZINES

[0088] The compounds provided herein are TOR kinase inhibitors, generally referred to as “Dihydropyrazino-Pyrazine Compound(s).” In one aspect, the TOR kinase inhibitors do not include rapamycin or rapamycin analogs (rapalogs).

[0089] In one embodiment, the Dihydropyrazino-Pyrazine Compounds include compounds having the following formula (I):



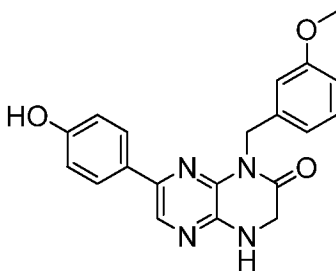
and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclylalkyl;

R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclylalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,

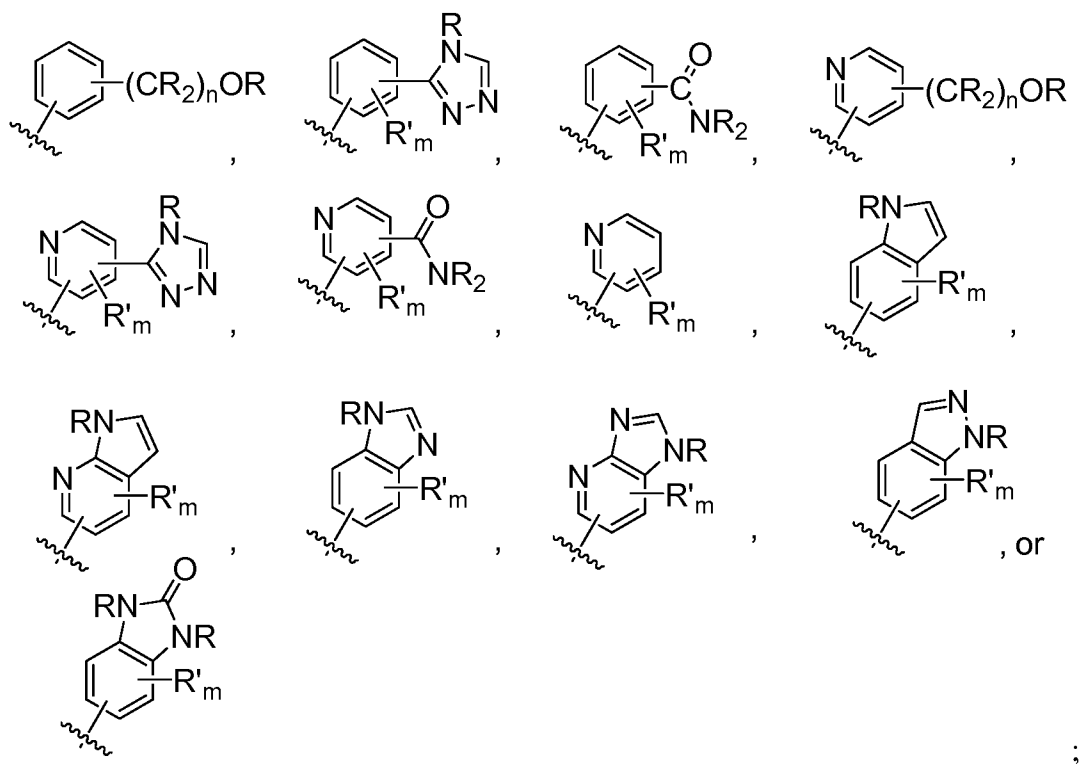
wherein in certain embodiments, the Dihydropyrazino-Pyrazine Compounds do not include 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one, depicted below:



[0090] In some embodiments of compounds of formula (I), R^1 is substituted or unsubstituted aryl or substituted or unsubstituted heteroaryl. For example, R^1 is phenyl, pyridyl, pyrimidyl, benzimidazolyl, 1H-pyrrolo[2,3-b]pyridyl, indazolyl, indolyl, 1H-imidazo[4,5-b]pyridyl, 1H-imidazo[4,5-b]pyridin-2(3H)-onyl, 3H-imidazo[4,5-b]pyridyl, or pyrazolyl, each optionally substituted. In some embodiments, R^1 is phenyl substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C_{1-8} alkyl (for example, methyl), substituted or unsubstituted heterocyclyl (for example, a substituted or unsubstituted triazolyl or pyrazolyl), aminocarbonyl, halogen (for example, fluorine), cyano, hydroxyalkyl and hydroxy. In other embodiments, R^1 is pyridyl substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C_{1-8} alkyl (for example, methyl), substituted or unsubstituted heterocyclyl (for example, a substituted or unsubstituted triazolyl), halogen, aminocarbonyl, cyano, hydroxyalkyl (for example, hydroxypropyl), -OR, and -NR₂, wherein each R is independently H, or a

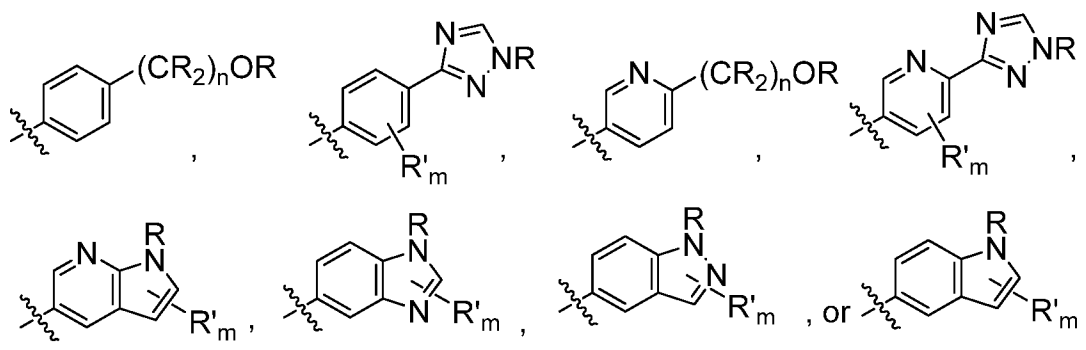
substituted or unsubstituted C_{1-4} alkyl. In some embodiments, R^1 is 1H-pyrrolo[2,3-b]pyridyl or benzimidazolyl, optionally substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C_{1-8} alkyl, and $-NR_2$, wherein R is independently H, or a substituted or unsubstituted C_{1-4} alkyl.

[0091] In some embodiments, R^1 is



wherein R is at each occurrence independently H, or a substituted or unsubstituted C_{1-4} alkyl (for example, methyl); R' is at each occurrence independently a substituted or unsubstituted C_{1-4} alkyl (for example, methyl), halogen (for example, fluoro), cyano, $-OR$, or $-NR_2$; m is 0-3; and n is 0-3. It will be understood by those skilled in the art that any of the substituents R' may be attached to any suitable atom of any of the rings in the fused ring systems.

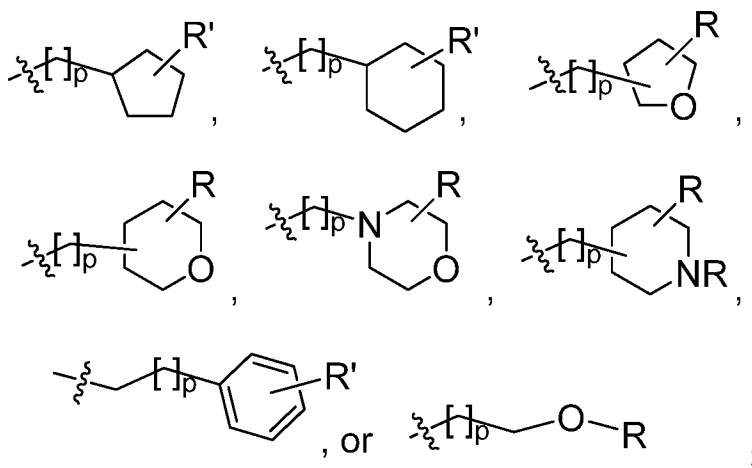
[0092] In some embodiments of compounds of formula (I), R^1 is



wherein R is at each occurrence independently H, or a substituted or unsubstituted C_{1-4} alkyl; R' is at each occurrence independently a substituted or unsubstituted C_{1-4} alkyl, halogen, cyano, -OR or -NR₂; m is 0-3; and n is 0-3.

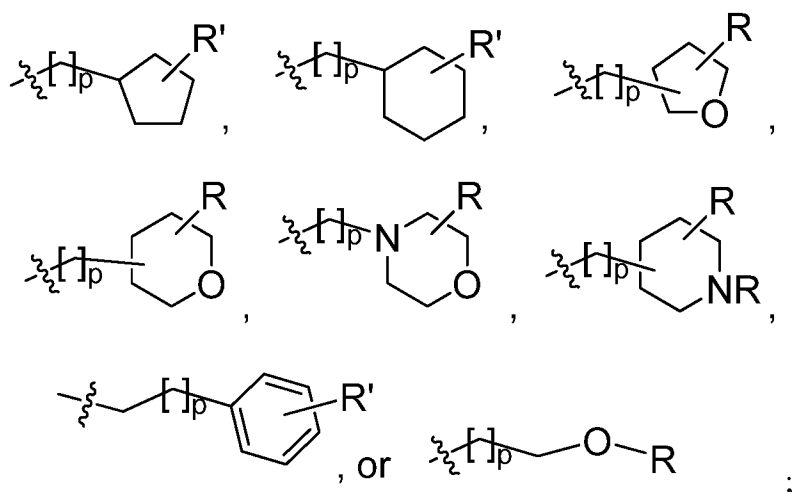
[0093] In some embodiments of compounds of formula (I), R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted C_{1-4} alkyl-heterocyclyl, substituted or unsubstituted C_{1-4} alkyl-aryl, or substituted or unsubstituted C_{1-4} alkyl-cycloalkyl. For example, R^2 is H, methyl, ethyl, n-propyl, isopropyl, n-butyl, *sec*-butyl, isobutyl, *tert*-butyl, n-pentyl, isopentyl, cyclopentyl, cyclohexyl, tetrahydrofuranyl, tetrahydropyranyl, (C_{1-4} alkyl)-phenyl, (C_{1-4} alkyl)-cyclopropyl, (C_{1-4} alkyl)-cyclobutyl, (C_{1-4} alkyl)-cyclopentyl, (C_{1-4} alkyl)-cyclohexyl, (C_{1-4} alkyl)-pyrrolidyl, (C_{1-4} alkyl)-piperidyl, (C_{1-4} alkyl)-piperazinyl, (C_{1-4} alkyl)-morpholinyl, (C_{1-4} alkyl)-tetrahydrofuranyl, or (C_{1-4} alkyl)-tetrahydropyranyl, each optionally substituted.

[0094] In other embodiments, R^2 is H, C_{1-4} alkyl, (C_{1-4} alkyl)(OR),



wherein R is at each occurrence independently H, or a substituted or unsubstituted C₁₋₄ alkyl (for example, methyl); R' is at each occurrence independently H, -OR, cyano, or a substituted or unsubstituted C₁₋₄ alkyl (for example, methyl); and p is 0-3.

[0095] In other embodiments of compounds of formula (I), R² is H, C₁₋₄ alkyl, (C₁₋₄alkyl)(OR),



wherein R is at each occurrence independently H, or a substituted or unsubstituted C₁₋₂ alkyl; R' is at each occurrence independently H, -OR, cyano, or a substituted or unsubstituted C₁₋₂ alkyl; and p is 0-1.

[0096] In other embodiments of compounds of formula (I), R³ is H.

[0097] In some such embodiments described herein, R¹ is substituted or unsubstituted aryl, or substituted or unsubstituted heteroaryl. For example, R¹ is phenyl, pyridyl, pyrimidyl, benzimidazolyl, 1H-pyrrolo[2,3-b]pyridyl, indazolyl, indolyl, 1H-imidazo[4,5-b]pyridine, pyridyl, 1H-imidazo[4,5-b]pyridin-2(3H)-onyl, 3H-imidazo[4,5-b]pyridyl, or pyrazolyl, each optionally substituted. In some embodiments, R¹ is phenyl substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C₁₋₈ alkyl, substituted or unsubstituted heterocyclyl, aminocarbonyl, halogen, cyano, hydroxyalkyl and hydroxy. In others, R¹ is pyridyl substituted with one or more substituents independently selected from the group consisting of C₁₋₈ alkyl, substituted or unsubstituted heterocyclyl, halogen, aminocarbonyl, cyano, hydroxyalkyl, -OR, and -NR₂, wherein each R is independently H, or a substituted or unsubstituted C₁₋₄ alkyl. In still others, R¹ is 1H-

pyrrolo[2,3-b]pyridyl or benzimidazolyl, optionally substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C₁₋₈ alkyl, and -NR₂, wherein R is independently H, or a substituted or unsubstituted C₁₋₄ alkyl.

[0098] In one embodiment of compounds of formula (I), R¹ is phenyl, pyridyl, pyrimidyl, benzimidazolyl, 1H-pyrrolo[2,3-b]pyridyl, indazolyl, or indolyl, each optionally substituted. In some such embodiments, R¹ is phenyl substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C₁₋₈ alkyl, substituted or unsubstituted heterocyclyl (for example, substituted or unsubstituted triazolyl), or halogen. In some other such embodiments, R¹ is pyridyl substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C₁₋₈ alkyl, substituted or unsubstituted heterocyclyl (for example, substituted or unsubstituted triazolyl), halogen, aminocarbonyl, hydroxyalkyl, -OR, and -NR₂, wherein each R is independently H, or a substituted or unsubstituted C₁₋₄ alkyl. In some other such embodiments, R¹ is 1H-pyrrolo[2,3-b]pyridyl or benzimidazolyl, optionally substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C₁₋₈ alkyl, and -NR₂, wherein R is independently H, or a substituted or unsubstituted C₁₋₄ alkyl.

[0099] In some embodiments of compounds of formula (I), R² is H, substituted or unsubstituted C₁₋₈ alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted C₁₋₄ alkyl-heterocyclyl, substituted or unsubstituted C₁₋₄ alkyl-aryl, or substituted or unsubstituted C₁₋₄ alkyl-cycloalkyl. In some such embodiments, R² is H, methyl, ethyl, isopropyl, cyclohexyl, (C₁₋₄ alkyl)-phenyl, (C₁₋₄ alkyl)-cyclohexyl, (or (C₁₋₄ alkyl)-tetrahydropyranyl, each optionally substituted.

[00100] In some such embodiments of R², R¹ is phenyl, pyridyl, pyrimidyl, benzimidazolyl, 1H-pyrrolo[2,3-b]pyridyl, indazolyl, or indolyl, each optionally substituted. For example, R¹ is phenyl, substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C₁₋₈ alkyl, substituted or unsubstituted heterocyclyl (for example, substituted or unsubstituted triazolyl), or halogen. In some other such embodiments, R¹ is pyridyl substituted with one or more substituents independently selected from the group consisting of substituted or unsubstituted C₁₋₈ alkyl, substituted or unsubstituted heterocyclyl (for example, substituted or unsubstituted triazolyl), halogen, aminocarbonyl,

hydroxyalkyl, -OR, and -NR₂, wherein each R is independently H, or a substituted or unsubstituted C₁₋₄ alkyl.

[00101] In certain embodiments, the compounds of formula (I) have an R¹ group set forth herein and an R² group set forth herein.

[00102] In some embodiments of compounds of formula (I), the compound inhibits TOR kinase. In other embodiments of compounds of formula (I), the compound inhibits DNA-PK. In certain embodiments of compounds of formula (I), the compound inhibits both TOR kinase and DNA-PK.

[00103] In some embodiments of compounds of formula (I), the compound at a concentration of 10 μM inhibits TOR kinase, DNA-PK, PI3K, or a combination thereof by at least about 50%. Compounds of formula (I) may be shown to be inhibitors of the kinases above in any suitable assay system.

[00104] Representative Dihydropyrazino-Pyrazine Compounds of formula (I) include:

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-((*trans*-4-methoxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-((*cis*-4-methoxycyclohexyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(1H-pyrrolo[2,3-*b*]pyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-((*cis*-4-methoxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-ethyl-7-(1H-pyrrolo[3,2-*b*]pyridin-5-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-((*cis*-4-methoxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(1H-benzo[*d*]imidazol-4-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(1H-pyrrolo[2,3-*b*]pyridin-4-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-((*trans*-4-methoxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-((*trans*-4-hydroxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(*cis*-4-hydroxycyclohexyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-(*cis*-4-hydroxycyclohexyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(tetrahydro-2H-pyran-4-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-ethyl-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-((*cis*-4-hydroxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-(tetrahydro-2H-pyran-4-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(1H-indol-4-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-((*trans*-4-hydroxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-((*cis*-4-hydroxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(*trans*-4-hydroxycyclohexyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(*trans*-4-methoxycyclohexyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-isopropyl-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-(*trans*-4-methoxycyclohexyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-(*trans*-4-hydroxycyclohexyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-isopropyl-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-ethyl-7-(5-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(2-hydroxypyridin-4-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-isopropyl-7-(4-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

5-(8-isopropyl-7-oxo-5,6,7,8-tetrahydropyrazino[2,3-*b*]pyrazin-2-yl)-4-methylpicolinamide;

7-(1H-indazol-4-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(2-aminopyrimidin-5-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(2-aminopyridin-4-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(methylamino)pyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-hydroxypyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(4-(1H-pyrazol-3-yl)phenyl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(pyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(1H-indazol-4-yl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(1H-indazol-6-yl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(pyrimidin-5-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(6-methoxypyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
1-(2-methoxyethyl)-7-(1H-pyrrolo[2,3-b]pyridin-5-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
1-ethyl-7-(1H-pyrrolo[2,3-b]pyridin-5-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
1-ethyl-7-(1H-indazol-4-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(pyridin-4-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(6-aminopyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
1-methyl-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
2-(2-hydroxypropan-2-yl)-5-(8-(*trans*-4-methoxycyclohexyl)-7-oxo-5,6,7,8-tetrahydropyrazino[2,3-b]pyrazin-2-yl)pyridine 1-oxide;
4-methyl-5-(7-oxo-8-((tetrahydro-2H-pyran-4-yl)methyl)-5,6,7,8-tetrahydropyrazino[2,3-b]pyrazin-2-yl)picolinamide;
5-(8-((*cis*-4-methoxycyclohexyl)methyl)-7-oxo-5,6,7,8-tetrahydropyrazino[2,3-b]pyrazin-2-yl)-4-methylpicolinamide;
7-(1H-pyrazol-4-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
1-(*trans*-4-methoxycyclohexyl)-7-(4-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
3-((7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-2-oxo-3,4-dihydropyrazino[2,3-b]pyrazin-1(2H)-yl)methyl)benzonitrile;
1-((*trans*-4-methoxycyclohexyl)methyl)-7-(4-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

3-(7-oxo-8-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-5,6,7,8-tetrahydropyrazino[2,3-b]pyrazin-2-yl)benzamide;

5-(8-((*trans*-4-methoxycyclohexyl)methyl)-7-oxo-5,6,7,8-tetrahydropyrazino[2,3-b]pyrazin-2-yl)-4-methylpicolinamide;

3-((7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-2-oxo-3,4-dihydropyrazino[2,3-b]pyrazin-1(2H)-yl)methyl)benzonitrile;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((1R,3R)-3-methoxycyclopentyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((1S,3R)-3-methoxycyclopentyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((1S,3S)-3-methoxycyclopentyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((1R,3S)-3-methoxycyclopentyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(1H-indazol-6-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(2-morpholinoethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

1-(*trans*-4-hydroxycyclohexyl)-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

1-(*cis*-4-hydroxycyclohexyl)-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-(2-morpholinoethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

1-isopropyl-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

7-(1H-imidazo[4,5-b]pyridin-6-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

1-((*cis*-4-methoxycyclohexyl)methyl)-7-(2-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;

1-(*trans*-4-hydroxycyclohexyl)-7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-(*cis*-4-hydroxycyclohexyl)-7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

4-(7-oxo-8-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-5,6,7,8-tetrahydropyrazino[2,3-*b*]pyrazin-2-yl)benzamide;

7-(1H-indazol-5-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(1H-pyrrolo[2,3-*b*]pyridin-5-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(tetrahydro-2H-pyran-4-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-((1*S*,3*R*)-3-methoxycyclopentyl)-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-((1*R*,3*R*)-3-methoxycyclopentyl)-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-((1*R*,3*S*)-3-methoxycyclopentyl)-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-((1*S*,3*S*)-3-methoxycyclopentyl)-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(1H-indol-5-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-ethyl-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(1H-indol-6-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(4-(2-hydroxypropan-2-yl)phenyl)-1-(*trans*-4-methoxycyclohexyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-(tetrahydro-2H-pyran-4-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-((*trans*-4-methoxycyclohexyl)methyl)-7-(2-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((*cis*-4-methoxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-(2-methoxyethyl)-7-(4-methyl-2-(methylamino)-1H-benzo[d]imidazol-6-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(7-methyl-2-oxo-2,3-dihydro-1H-benzo[d]imidazol-5-yl)-1-((tetrahydro-2H-pyran-4-yl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(2-methyl-4-(4H-1,2,4-triazol-3-yl)phenyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-(2-methoxyethyl)-7-(4-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-benzyl-7-(2-methyl-4-(4H-1,2,4-triazol-3-yl)phenyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(3-fluoro-4-(4H-1,2,4-triazol-3-yl)phenyl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(3-fluoro-4-(4H-1,2,4-triazol-3-yl)phenyl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(3-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-((*trans*-4-methoxycyclohexyl)-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((*trans*-4-methoxycyclohexyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(5-fluoro-2-methyl-4-(4H-1,2,4-triazol-3-yl)phenyl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(3-fluoro-2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-(2-methoxyethyl)-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((*trans*-4-methoxycyclohexyl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

1-(cyclopentylmethyl)-7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(4-(2-hydroxypropan-2-yl)phenyl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

(*S*)-7-(6-(1-hydroxyethyl)pyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

(*R*)-7-(6-(1-hydroxyethyl)pyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-((tetrahydro-2H-pyran-4-yl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(4-(2-hydroxypropan-2-yl)phenyl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-(4-(trifluoromethyl)benzyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-(3-(trifluoromethyl)benzyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-(3-methoxypropyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(4-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-(2-methoxyethyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((tetrahydro-2H-pyran-4-yl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(4-methyl-2-(methylamino)-1H-benzo[*d*]imidazol-6-yl)-1-((tetrahydro-2H-pyran-4-yl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(2-amino-4-methyl-1H-benzo[*d*]imidazol-6-yl)-1-((tetrahydro-2H-pyran-4-yl)methyl)-3,4-dihydropyrazino[2,3-*b*]pyrazin-2(1H)-one;

7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
(R)-7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-3-methyl-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
(S)-7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-3-methyl-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-3,3-dimethyl-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(2-amino-4-methyl-1H-benzo[d]imidazol-6-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(2-methyl-4-(1H-1,2,4-triazol-3-yl)phenyl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
7-(4-(1H-1,2,4-triazol-5-yl)phenyl)-1-(2-(tetrahydro-2H-pyran-4-yl)ethyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one;
1-(1-hydroxypropan-2-yl)-7-(2-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one; and
1-(2-hydroxyethyl)-7-(2-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one,
and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof.

4.3 METHODS FOR MAKING DIHYDROPYRAZINO-PYRAZINE COMPOUNDS

[00105] The Dihydropyrazino-Pyrazine Compounds can be obtained via standard, well-known synthetic methodology, see *e.g.*, March, J. Advanced Organic Chemistry; Reactions Mechanisms, and Structure, 4th ed., 1992. Starting materials useful for preparing compounds of

formula (I) and intermediates therefore, are commercially available or can be prepared from commercially available materials using known synthetic methods and reagents.

[00106] Particular methods for preparing compounds of formula (I) are disclosed in U.S. Patent No. 8,110,578, issued February 7, 2012, and U.S. Patent No. 8,569,494, issued October 29, 2013, each incorporated by reference herein in their entirety.

4.4 METHODS OF USE

[00107] Provided herein are methods for treating or preventing head and neck squamous cell carcinoma (also known as HNSCC) characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to a patient having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient who has locally advanced, recurrent or metastatic, HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, not amenable to curative surgical resection. In another embodiment, a Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function who has received at least one prior line of platinum based chemotherapy. In some embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient who has a HNSCC showing DNA-PK overexpression. In some embodiments, the HNSCC is characterized by deletion of all or part of chromosome 11q. In other embodiments, the HNSCC is characterized by deletion of chromosome 11q22. In others, the HNSCC is characterized by loss or mutation of the gene encoding ATM. In yet others, the HNSCC is characterized by loss of ATM expression or function.

[00108] In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by deletion of all or part of chromosome 11q. In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by deletion of chromosome 11q22. In certain embodiments, a

Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by loss or mutation of the gene encoding ATM. In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by loss of ATM expression or function. In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by deletion of chromosome 11q22. In some embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by loss of ataxia telangiectasia mutated (ATM) expression. In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by deletion of chromosome 11q22 measured by FISH analysis. In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient having HNSCC characterized by loss of ATM expression measured by IHC analysis or Western Blot.

[00109] In one embodiment the patient is unable to swallow or has difficulty swallowing. In some such embodiments, the patient is a pediatric patient.

[00110] In one embodiment, provided herein are methods for achieving a Response Evaluation Criteria in Solid Tumors (for example, RECIST 1.1) (*see* Eisenhauer E.A., Therasse P., Bogaerts J., et al. New response evaluation criteria in solid tumors: Revised RECIST guideline (version 1.1). *European J. Cancer*; 2009; (45) 228–247) of complete response, partial response or stable disease in a patient having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient.

[00111] In one embodiment, provided herein are methods for inhibiting phosphorylation of S6RP, 4E-BP1 and/or AKT in a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient. In some such embodiments, the inhibition of phosphorylation is assessed in a biological sample of the patient, such as in circulating blood and/or tumor cells, skin biopsies and/or tumor biopsies or aspirate. In such embodiments, the amount of inhibition of phosphorylation is assessed by comparison of the amount of phospho- S6RP, 4E-BP1 and/or AKT before and after administration of the

Dihydropyrazino-Pyrazine Compound. In certain embodiments, provided herein are methods for measuring inhibition of phosphorylation of S6RP, 4E-BP1 or AKT in a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient, measuring the amount of phosphorylated S6RP, 4E BP1 and/or AKT in said patient, and comparing said amount of phosphorylated S6RP, 4E BP1 and/or AKT to that of said patient prior to administration of an effective amount of a Dihydropyrazino-Pyrazine Compound.

[00112] In certain embodiments, provided herein are methods for inhibiting phosphorylation of S6RP, 4E-BP1 and/or AKT in a biological sample of a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient and comparing the amount of phosphorylated S6RP, 4E-BP1 and/or AKT in a biological sample of a patient obtained prior to and after administration of said Dihydropyrazino-Pyrazine Compound, wherein less phosphorylated S6RP, 4E-BP1 and/or AKT in said biological sample obtained after administration of said Dihydropyrazino-Pyrazine Compound relative to the amount of phosphorylated S6RP, 4E-BP1 and/or AKT in said biological sample obtained prior to administration of said Dihydropyrazino-Pyrazine Compound indicates inhibition.

[00113] In one embodiment, provided herein are methods for inhibiting DNA-dependent protein kinase (DNA-PK) activity in a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. In some embodiments, DNA-PK inhibition is assessed in the skin of the patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, in one example in a UV light-irradiated skin sample of said patient. In another embodiment, DNA-PK inhibition is assessed in a tumor biopsy or aspirate of a patient

having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. In one embodiment, inhibition is assessed by measuring the amount of phosphorylated DNA-PK S2056 (also known as pDNA-PK S2056) before and after administration of the Dihydropyrazino-Pyrazine Compound. In certain embodiments, provided herein are methods for measuring inhibition of phosphorylation of DNA-PK S2056 in a skin sample of a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient, measuring the amount of phosphorylated DNA-PK S2056 present in the skin sample and comparing said amount of phosphorylated DNA-PK S2056 to that in a skin sample from said patient prior to administration of an effective amount of a Dihydropyrazino-Pyrazine Compound. In one embodiment, the skin sample is irradiated with UV light.

[00114] In certain embodiments, provided herein are methods for inhibiting DNA-dependent protein kinase (DNA-PK) activity in a skin sample of a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient and comparing the amount of phosphorylated DNA-PK in a biological sample of a patient obtained prior to and after administration of said Dihydropyrazino-Pyrazine Compound, wherein less phosphorylated DNA-PK in said biological sample obtained after administration of said Dihydropyrazino-Pyrazine Compound relative to the amount of phosphorylated DNA-PK in said biological sample obtained prior to administration of said Dihydropyrazino-Pyrazine Compound indicates inhibition.

[00115] In some embodiments, the Dihydropyrazino-Pyrazine Compound is a compound as described herein. In one embodiment, the Dihydropyrazino-Pyrazine Compound is Compound 1 (a Dihydropyrazino-Pyrazine Compound set forth herein having molecular formula $C_{16}H_{16}N_8O$). In one embodiment, the Dihydropyrazino-Pyrazine Compound is Compound 2 (a Dihydropyrazino-Pyrazine Compound set forth herein having molecular formula $C_{21}H_{27}N_5O_3$). In one embodiment, the Dihydropyrazino-Pyrazine Compound is Compound 3 (a

Dihydropyrazino-Pyrazine Compound set forth herein having molecular formula $C_{20}H_{25}N_5O_3$. In one embodiment, Compound 1 is 1-ethyl-7-(2-methyl-6-(1H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one, or a tautomer thereof, for example, 1-ethyl-7-(2-methyl-6-(4H-1,2,4-triazol-3-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one, or 1-ethyl-7-(2-methyl-6-(1H-1,2,4-triazol-5-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one. In one embodiment, Compound 2 is 7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((1r,4r)-4-methoxycyclohexyl)-3,4-dihydropyrazino-[2,3-b]pyrazin-2(1H)-one, alternatively named 7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((*trans*)-4-methoxycyclohexyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one, or 7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-1-((1R*,4R*)-4-methoxycyclohexyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one. In another embodiment, Compound 3 is 1-((*trans*)-4-hydroxycyclohexyl)-7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one, alternatively named 1-((1r,4r)-4-hydroxycyclohexyl)-7-(6-(2-hydroxypropan-2-yl)pyridin-3-yl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one. In one embodiment, Compound 3 is a metabolite of Compound 2.

[00116] A Dihydropyrazino-Pyrazine Compound can be combined with radiation therapy or surgery. In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to patient who is undergoing radiation therapy, has previously undergone radiation therapy or will be undergoing radiation therapy. In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient who has undergone HNSCC removal surgery.

[00117] Further provided herein are methods for treating patients who have been previously treated for head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, but are non-responsive to standard therapies, as well as those who have not previously been treated. Further provided herein are methods for treating patients who have undergone surgery in an attempt to treat the condition at issue, as well as those who have not. Because patients with head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, may have heterogenous clinical manifestations and varying clinical outcomes, the treatment given to a patient may vary, depending on his/her prognosis. The skilled clinician will be able to readily determine without undue experimentation specific secondary

agents, types of surgery, and types of non-drug based standard therapy that can be effectively used to treat an individual patient with head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

[00118] In one embodiment, the head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, is that in which the PI3K/mTOR pathway is activated. In certain embodiments, the head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function is that in which the PI3K/mTOR pathway is activated due to PTEN loss, a PIK3Ca mutation or EGFR overexpression, or a combination thereof.

[00119] In some embodiments, the HNSCC is characterized by deletion of all or part of chromosome 11q. In other embodiments, the HNSCC is characterized by deletion of chromosome 11q22. In others, the HNSCC is characterized by loss or mutation of the gene encoding ATM. In yet others, the HNSCC is characterized by loss of ATM expression or function.

4.5 PHARMACEUTICAL COMPOSITIONS AND ROUTES OF ADMINISTRATION

[00120] Provided herein are compositions, comprising an effective amount of a Dihydropyrazino-Pyrazine Compound, and compositions comprising an effective amount of a Dihydropyrazino-Pyrazine Compound and a pharmaceutically acceptable carrier or vehicle. In some embodiments, the pharmaceutical compositions described herein are suitable for oral, parenteral, mucosal, transdermal or topical administration.

[00121] The Dihydropyrazino-Pyrazine Compounds can be administered to a patient orally or parenterally in the conventional form of preparations, such as capsules, microcapsules, tablets, granules, powder, troches, pills, suppositories, injections, suspensions and syrups. Suitable formulations can be prepared by methods commonly employed using conventional, organic or inorganic additives, such as an excipient (*e.g.*, sucrose, starch, mannitol, sorbitol, lactose, glucose, cellulose, talc, calcium phosphate or calcium carbonate), a binder (*e.g.*, cellulose, methylcellulose, hydroxymethylcellulose, polypropylpyrrolidone,

polyvinylpyrrolidone, gelatin, gum arabic, polyethyleneglycol, sucrose or starch), a disintegrator (*e.g.*, starch, carboxymethylcellulose, hydroxypropylstarch, low substituted hydroxypropylcellulose, sodium bicarbonate, calcium phosphate or calcium citrate), a lubricant (*e.g.*, magnesium stearate, light anhydrous silicic acid, talc or sodium lauryl sulfate), a flavoring agent (*e.g.*, citric acid, menthol, glycine or orange powder), a preservative (*e.g.*, sodium benzoate, sodium bisulfite, methylparaben or propylparaben), a stabilizer (*e.g.*, citric acid, sodium citrate or acetic acid), a suspending agent (*e.g.*, methylcellulose, polyvinyl pyrrolidone or aluminum stearate), a dispersing agent (*e.g.*, hydroxypropylmethylcellulose), a diluent (*e.g.*, water), and base wax (*e.g.*, cocoa butter, white petrolatum or polyethylene glycol). The effective amount of the Dihydropyrazino-Pyrazine Compound in the pharmaceutical composition may be at a level that will exercise the desired effect; for example, about 0.005 mg/kg of a patient's body weight to about 10 mg/kg of a patient's body weight in unit dosage for both oral and parenteral administration.

[00122] The dose of a Dihydropyrazino-Pyrazine Compound to be administered to a patient is rather widely variable and can be subject to the judgment of a health-care practitioner. In general, the Dihydropyrazino-Pyrazine Compounds can be administered one to four times a day in a dose of about 0.005 mg/kg of a patient's body weight to about 10 mg/kg of a patient's body weight in a patient, but the above dosage may be properly varied depending on the age, body weight and medical condition of the patient and the type of administration. In one embodiment, the dose is about 0.01 mg/kg of a patient's body weight to about 5 mg/kg of a patient's body weight, about 0.05 mg/kg of a patient's body weight to about 1 mg/kg of a patient's body weight, about 0.1 mg/kg of a patient's body weight to about 0.75 mg/kg of a patient's body weight, about 0.25 mg/kg of a patient's body weight to about 0.5 mg/kg of a patient's body weight, or about 0.007 mg/kg of a patient's body weight to about 1.7 mg/kg of patient's body weight. In one embodiment, one dose is given per day. In another embodiment, two doses are given per day. In any given case, the amount of the Dihydropyrazino-Pyrazine Compound administered will depend on such factors as the solubility of the active component, the formulation used and the route of administration.

[00123] In another embodiment, provided herein are methods for the treatment or prevention of head and neck squamous cell carcinoma characterized by deletion of all or part of

chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising the administration of about 0.375 mg/day to about 750 mg/day, about 0.75 mg/day to about 375 mg/day, about 3.75 mg/day to about 75 mg/day, about 7.5 mg/day to about 55 mg/day, about 18 mg/day to about 37 mg/day, about 0.5 mg/day to about 60 mg/day, or about 0.5 mg/day to about 128 mg/day of a Dihydropyrazino-Pyrazine Compound to a patient in need thereof. In another embodiment, provided herein are methods for the treatment or prevention of head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, comprising the administration of about 0.5 mg/day to about 1200 mg/day, about 10 mg/day to about 1200 mg/day, about 100 mg/day to about 1200 mg/day, about 400 mg/day to about 1200 mg/day, about 600 mg/day to about 1200 mg/day, about 400 mg/day to about 800 mg/day or about 600 mg/day to about 800 mg/day of a Dihydropyrazino-Pyrazine Compound to a patient in need thereof. In a particular embodiment, the methods disclosed herein comprise the administration of 0.5 mg/day, 1 mg/day, 2 mg/day, 4 mg/day, 8 mg/day, 10 mg/day, 15 mg/day, 16 mg/day, 20 mg/day, 25 mg/day, 30 mg/day, 45 mg/day, 60 mg/day, 90 mg/day, 120 mg/day or 128 mg/day of a Dihydropyrazino-Pyrazine Compound to a patient in need thereof.

[00124] In another embodiment, provided herein are unit dosage formulations that comprise between about 0.1 mg and about 2000 mg, about 1 mg and 200 mg, about 35 mg and about 1400 mg, about 125 mg and about 1000 mg, about 250 mg and about 1000 mg, or about 500 mg and about 1000 mg of a Dihydropyrazino-Pyrazine Compound.

[00125] In a particular embodiment, provided herein are unit dosage formulation comprising about 0.1 mg, 0.25 mg, 0.5 mg, 1 mg, 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 35 mg, 45 mg, 50 mg, 60 mg, 70 mg, 75 mg, 100 mg, 125 mg, 140 mg, 150 mg, 175 mg, 200 mg, 250 mg, 280 mg, 300 mg, 350 mg, 400 mg, 500 mg, 560 mg, 600 mg, 700 mg, 750 mg, 800 mg, 1000 mg or 1400 mg of a Dihydropyrazino-Pyrazine Compound. In a particular embodiment, provided herein are unit dosage formulations that comprise 2.5 mg, 5 mg, 7.5 mg, 8 mg, 10 mg, 15 mg, 20 mg, 30 mg, 45 mg, 50 mg, 60 mg or 100 mg of a Dihydropyrazino-Pyrazine Compound. In a particular embodiment, provided herein are unit dosage formulations that comprise 5 mg, 7.5 mg or 10 mg of a Dihydropyrazino-Pyrazine Compound.

[00126] A Dihydropyrazino-Pyrazine Compound can be administered once, twice, three, four or more times daily.

[00127] In certain embodiments, a Dihydropyrazino-Pyrazine Compound is administered to a patient in cycles. Cycling therapy involves the administration of an active agent for a period of time, followed by a rest for a period of time, and repeating this sequential administration. Cycling therapy can reduce the development of resistance, avoid or reduce the side effects, and/or improves the efficacy of the treatment.

[00128] In one embodiment, a Dihydropyrazino-Pyrazine Compound is administered daily in single or divided doses for about 3 days, about 5 days, about one week, about two weeks, about three weeks, about four weeks (*e.g.*, 28 days), about five weeks, about six weeks, about seven weeks, about eight weeks, about ten weeks, about fifteen weeks, or about twenty weeks, followed by a rest period of about 1 day to about ten weeks. In one embodiment, the methods provided herein contemplate cycling treatments of about one week, about two weeks, about three weeks, about four weeks, about five weeks, about six weeks, about eight weeks, about ten weeks, about fifteen weeks, or about twenty weeks. In some embodiments, a Dihydropyrazino-Pyrazine Compound is administered in single or divided doses for about 3 days, about 5 days, about one week, about two weeks, about three weeks, about four weeks (*e.g.*, 28 days), about five weeks, or about six weeks with a rest period of about 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 12, 14, 16, 18, 20, 22, 24, 26, 28, 29, or 30 days. In some embodiments, the rest period is 1 day. In some embodiments, the rest period is 3 days. In some embodiments, the rest period is 7 days. In some embodiments, the rest period is 14 days. In some embodiments, the rest period is 28 days. The frequency, number and length of dosing cycles can be increased or decreased.

[00129] A Dihydropyrazino-Pyrazine Compound can be administered orally for reasons of convenience. In one embodiment, when administered orally, a Dihydropyrazino-Pyrazine Compound is administered with a meal and water. In another embodiment, the Dihydropyrazino-Pyrazine Compound is dispersed in water or juice (*e.g.*, apple juice or orange juice) and administered orally as a suspension. In another embodiment, when administered orally, a Dihydropyrazino-Pyrazine Compound is administered in a fasted state.

[00130] The Dihydropyrazino-Pyrazine Compound can also be administered intradermally, intramuscularly, intraperitoneally, percutaneously, intravenously, subcutaneously,

intranasally, epidurally, sublingually, intracerebrally, intravaginally, transdermally, rectally, mucosally, by inhalation, intragastrically, or topically to the ears, nose, eyes, or skin. The mode of administration is left to the discretion of the health-care practitioner, and can depend in-part upon the site of the medical condition.

[00131] In one embodiment of the methods described herein, the Dihydro-Pyrazine Compound is administered via a percutaneous intragastric or jejunal feeding tube. In one embodiment, when administered via a feeding tube, the Dihydropyrazino-Pyrazine Compound is administered in solution, wherein the solution is obtained by, for example, dissolving a tablet or capsule containing the Dihydro-Pyrazine Compound in water.

[00132] In one embodiment, provided herein are capsules containing a Dihydropyrazino-Pyrazine Compound without an additional carrier, excipient or vehicle.

[00133] In another embodiment, provided herein are compositions, comprising an effective amount of a Dihydropyrazino-Pyrazine Compound and a pharmaceutically acceptable carrier or vehicle, wherein a pharmaceutically acceptable carrier or vehicle can comprise an excipient, diluent, or a mixture thereof. In one embodiment, the composition is a pharmaceutical composition.

[00134] The compositions can be in the form of tablets, chewable tablets, capsules, solutions, parenteral solutions, troches, suppositories and suspensions and the like. Compositions can be formulated to contain a daily dose, or a convenient fraction of a daily dose, in a dosage unit, which may be a single tablet or capsule or convenient volume of a liquid. In one embodiment, the solutions are prepared from water-soluble salts, such as the hydrochloride salt. In general, all of the compositions are prepared according to known methods in pharmaceutical chemistry. Capsules can be prepared by mixing a Dihydropyrazino-Pyrazine Compound with a suitable carrier or diluent and filling the proper amount of the mixture in capsules. The usual carriers and diluents include, but are not limited to, inert powdered substances such as starch of many different kinds, powdered cellulose, especially crystalline and microcrystalline cellulose, sugars such as fructose, mannitol and sucrose, grain flours and similar edible powders.

[00135] Tablets can be prepared by direct compression, by wet granulation, or by dry granulation. Their formulations usually incorporate diluents, binders, lubricants and

disintegrators as well as the compound. Typical diluents include, for example, various types of starch, lactose, mannitol, kaolin, calcium phosphate or sulfate, inorganic salts such as sodium chloride and powdered sugar. Powdered cellulose derivatives are also useful. In one embodiment, the pharmaceutical composition is lactose-free. Typical tablet binders are substances such as starch, gelatin and sugars such as lactose, fructose, glucose and the like. Natural and synthetic gums are also convenient, including acacia, alginates, methylcellulose, polyvinylpyrrolidone and the like. Polyethylene glycol, ethylcellulose and waxes can also serve as binders.

[00136] A lubricant might be necessary in a tablet formulation to prevent the tablet and punches from sticking in the die. The lubricant can be chosen from such slippery solids as talc, magnesium and calcium stearate, stearic acid and hydrogenated vegetable oils. Tablet disintegrators are substances that swell when wetted to break up the tablet and release the compound. They include starches, clays, celluloses, alginates and gums. More particularly, corn and potato starches, methylcellulose, agar, bentonite, wood cellulose, powdered natural sponge, cation-exchange resins, alginic acid, guar gum, citrus pulp and carboxymethyl cellulose, for example, can be used as well as sodium lauryl sulfate. Tablets can be coated with sugar as a flavor and sealant, or with film-forming protecting agents to modify the dissolution properties of the tablet. The compositions can also be formulated as chewable tablets, for example, by using substances such as mannitol in the formulation.

[00137] When it is desired to administer a Dihydropyrazino-Pyrazine Compound as a suppository, typical bases can be used. Cocoa butter is a traditional suppository base, which can be modified by addition of waxes to raise its melting point slightly. Water-miscible suppository bases comprising, particularly, polyethylene glycols of various molecular weights are in wide use.

[00138] The effect of the Dihydropyrazino-Pyrazine Compound can be delayed or prolonged by proper formulation. For example, a slowly soluble pellet of the Dihydropyrazino-Pyrazine Compound can be prepared and incorporated in a tablet or capsule, or as a slow-release implantable device. The technique also includes making pellets of several different dissolution rates and filling capsules with a mixture of the pellets. Tablets or capsules can be coated with a film that resists dissolution for a predictable period of time. Even the parenteral preparations can

be made long-acting, by dissolving or suspending the Dihydropyrazino-Pyrazine Compound in oily or emulsified vehicles that allow it to disperse slowly in the serum.

[00139] In certain embodiments, Compound 2 is administered in a formulation set forth in U.S. Patent Application Publication No. 2013-0142873, published June 6, 2013, which is incorporated herein in its entirety (see particularly paragraph [0323] to paragraph [0424], and paragraph [0636] to paragraph [0655]). In other embodiments, Compound 2 is administered in a formulation set forth in U.S. Provisional Patent Application No. 61/828,506, filed May 29, 2013, which is incorporated herein in its entirety (see particularly paragraph [0246] to paragraph [0403], and paragraph [0571] to paragraph [0586]).

[00140] In certain embodiments, Compound 1 is administered in a formulation set forth in U.S. Provisional Application No. 61/813,064, filed April 17, 2013, which is incorporated herein in its entirety (see particularly paragraph [0168] to paragraph [0189] and paragraph [0262] to paragraph [0294]). In other embodiments, Compound 1 is administered in a formulation set forth in U.S. Provisional Patent Application No. 61/911,201, filed December 3, 2013, which is incorporated herein in its entirety (see particularly paragraph [0170] to paragraph [0190], and paragraph [0264] to paragraph [0296]).

4.6 KITS

[00141] In certain embodiments, provided herein are kits comprising a Dihydropyrazino-Pyrazine Compound.

[00142] In other embodiments, provide herein are kits comprising a Dihydropyrazino-Pyrazine Compound and means for monitoring patient response to administration of said Dihydropyrazino-Pyrazine Compound. In certain embodiments, the patient has head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. In particular embodiments, the patient response measured is inhibition of disease progression, inhibition of tumor growth, reduction of primary and/or secondary tumor(s), relief of tumor-related symptoms, improvement in quality of life, delayed appearance of primary and/or secondary tumors, slowed development of primary and/or secondary tumors, decreased occurrence of

primary and/or secondary tumors, slowed or decreased severity of secondary effects of disease, arrested tumor growth or regression of tumor.

[00143] In other embodiments, provided herein are kits comprising a Dihydropyrazino-Pyrazine Compound and means for measuring the amount of inhibition of phosphorylation of S6RP, 4E-BP1 and/or AKT in a patient. In certain embodiments, the kits comprise means for measuring inhibition of phosphorylation of S6RP, 4E-BP1 and/or AKT in circulating blood or tumor cells and/or skin biopsies or tumor biopsies/aspirates of a patient. In certain embodiments, provided herein are kits comprising a Dihydropyrazino-Pyrazine Compound and means for measuring the amount of inhibition of phosphorylation as assessed by comparison of the amount of phospho- S6RP, 4E-BP1 and/or AKT before, during and/or after administration of the Dihydropyrazino-Pyrazine Compound. In certain embodiments, the patient has head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

[00144] In other embodiments, provided herein are kits comprising a Dihydropyrazino-Pyrazine Compound and means for measuring the amount of inhibition of DNA-dependent protein kinase (DNA-PK) activity in a patient. In certain embodiments, the kits comprise means for measuring the amount of inhibition of DNA-dependent protein kinase (DNA-PK) activity in a skin sample and/or a tumor biopsy/aspirate of a patient. In one embodiment, the kits comprise a means for measuring the amount of pDNA-PK S2056 in a skin sample and/or a tumor biopsy/aspirate of a patient. In one embodiment, the skin sample is irradiated by UV light. In certain embodiments, provided herein are kits comprising a Dihydropyrazino-Pyrazine Compound and means for measuring the amount of inhibition of DNA-dependent protein kinase (DNA-PK) activity before, during and/or after administration of the Dihydropyrazino-Pyrazine Compound. In certain embodiments, provided herein are kits comprising a Dihydropyrazino-Pyrazine Compound and means for measuring the amount of phosphorylated DNA-PK S2056 before, during and/or after administration of the Dihydropyrazino-Pyrazine Compound. In certain embodiments, the patient has head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

[00145] In certain embodiments, the kits provided herein comprise an amount of a Dihydropyrazino-Pyrazine Compound effective for treating or preventing head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. In certain embodiments, the kits provided herein comprise Compound 1.

[00146] In certain embodiments, the kits provided herein further comprise instructions for use, such as for administering a Dihydropyrazino-Pyrazine Compound and/or monitoring patient response to administration of a Dihydropyrazino-Pyrazine Compound.

5. EXAMPLES

5.1 COMPOUND FORMULATIONS

[00147] Illustrative formulations of Compound 1 useful in the methods provided herein are set forth in Table 1, below.

[00148] **Table 1: Exemplary Tablet Formulations**

	% w/w (mg)			
Batch #	1	2	3	4
Ingredients				
Compound 1 (active ingredient)	10	10	10	10
Mannitol (Mannogem EZ)	qs	qs	qs	qs
Microcrystalline Cellulose (PH 112)	25	25	25	25
Sodium Starch Glycolate	3	3	3	3
Silicon dioxide	1	1	1	1
Stearic acid	0.5	0.5	0.5	0.5
Disodium EDTA			0.5	0.5
BHT		0.4		0.4
Magnesium Stearate	0.65	0.65	0.65	0.65
Total	100	100	100	100
Color	Yellow	Yellow	Yellow	Yellow

[00149] Illustrative formulations of Compound 2 useful in the methods provided herein are set forth in Tables 2-5, below.

[00150] Table 2

Ingredients	Amounts	
	mg	% w/w
Compound 2	20.0	15.38
Lactose monohydrate, NF (Fast Flo 316)	63.98	49.22
Microcrystalline cellulose, NF (Avicel pH 102)	40.30	31.00
Croscarmellose sodium, NF (Ac-Di-Sol)	3.90	3.00
Stearic acid, NF	0.52	0.40
Magnesium Stearate, NF	1.30	1.00
Total	130.0	100
Opadry yellow 03K12429	5.2	4.0

[00151] Table 3

Ingredients	Amounts	
	mg	% w/w
Compound 2	5.0	3.80
Lactose monohydrate, NF (Fast Flo 316)	78.98	60.70
Microcrystalline cellulose, NF (Avicel pH 102)	40.30	31.00
Croscarmellose sodium, NF (Ac-Di-Sol)	3.90	3.00
Stearic acid, NF	0.52	0.40
Magnesium Stearate, NF	1.30	1.00
Total	130.0	100
Opadry II pink 85F94211	5.2	4% weight gain

[00152] Table 4

Ingredients	Amounts			
	mg			% w/w
Compound 2	15.0	20.0	30.0	15.38
Lactose monohydrate, NF (Fast Flo	48.37	64.50	96.75	49.62

Ingredients	Amounts			
	mg			% w/w
316)				
Microcrystalline cellulose, NF (Avicel pH 112)	30.23	40.30	60.45	31.00
Croscarmellose sodium, NF (Ac-Di-Sol)	2.925	3.90	5.85	3.00
Magnesium Stearate, NF	0.975	1.30	1.95	1.00
Total	97.50	130.0	195.00	100
Opadry yellow 03K12429	3.9			4.0
Opadry II Pink 85F94211		5.2		4.0
Opadry Pink 03K140004			7.8	4.0

[00153] Table 5

Ingredients	Amounts	
	mg	% w/w
Compound 2	45.00	15.38
Lactose monohydrate, NF (Fast Flo 316)	143.955	49.22
Microcrystalline cellulose, NF (Avicel pH 102)	90.675	31.00
Croscarmellose sodium, NF (Ac-Di-Sol)	8.775	3.00
Stearic acid, NF	1.170	0.40
Magnesium Stearate, NF	2.925	1.00
Total	292.50	100
Opadry pink 03K140004	11.70	4.0

5.2 BIOLOGICAL EXAMPLES

5.2.1 Biochemical assays

[00154] **mTOR HTR-FRET Assay**. The following is an example of an assay that can be used to determine the TOR kinase inhibitory activity of a test compound. Dihydropyrazino-Pyrazine Compounds were dissolved in DMSO and prepared as 10 mM stocks and diluted appropriately for the experiments. Reagents were prepared as follows:

[00155] “Simple TOR buffer” (used to dilute high glycerol TOR fraction): 10 mM Tris pH 7.4, 100 mM NaCl, 0.1% Tween-20, 1 mM DTT. Invitrogen mTOR (cat#PV4753) was diluted in this buffer to an assay concentration of 0.200 µg/mL.

[00156] ATP/Substrate solution: 0.075 mM ATP, 12.5 mM MnCl₂, 50 mM Hepes, pH 7.4, 50 mM β-GOP, 250 nM Microcystin LR, 0.25 mM EDTA, 5 mM DTT, and 3.5 µg/mL GST-p70S6.

[00157] Detection reagent solution: 50 mM HEPES, pH 7.4, 0.01% Triton X-100, 0.01% BSA, 0.1 mM EDTA, 12.7 µg/mL Cy5-αGST Amersham (Cat#PA92002V), 9 ng/mL α-phospho p70S6 (Thr389) (Cell Signaling Mouse Monoclonal #9206L), 627 ng/mL α-mouse Lance Eu (Perkin Elmer Cat#AD0077).

[00158] To 20 µL of the Simple TOR buffer is added 0.5 µL of test compound in DMSO. To initiate the reaction 5 µL of ATP/Substrate solution was added to 20 µL of the Simple TOR buffer solution (control) and to the compound solution prepared above. The assay was stopped after 60 min by adding 5 µL of a 60 mM EDTA solution; 10 µL of detection reagent solution was then added and the mixture was allowed to sit for at least 2 hours before reading on a Perkin-Elmer Envision Microplate Reader set to detect LANCE Eu TR-FRET (excitation at 320 nm and emission at 495/520 nm).

[00159] Dihydropyrazino-Pyrazine Compound were tested in the mTOR HTR-FRET assay and were found to have activity therein, with certain compounds having an IC₅₀ below 10 µM in the assay, with some compounds having an IC₅₀ between 0.005 nM and 250 nM,

others having an IC_{50} between 250 nM and 500 nM, others having an IC_{50} between 500 nM and 1 μ M, and others having an IC_{50} between 1 μ M and 10 μ M.

[00160] **DNA-PK assay**. DNA-PK assay is performed using the procedures supplied in the Promega DNA-PK assay kit (catalog # V7870). DNA-PK enzyme can be purchased from Promega (Promega cat#V5811).

[00161] Selected Dihydropyrazino-Pyrazine Compounds as described herein have, or are expected to have, an IC_{50} below 10 μ M in this assay, with some Dihydropyrazino-Pyrazine Compounds as described herein having an IC_{50} below 1 μ M, and others having an IC_{50} below 0.10 μ M.

5.2.2 Cell based assays

[00162] **Growth inhibition assay for Head and Neck Squamous Cancer Cell (HNSCC) lines characterized by deletion of chromosome 11q22 or loss of ataxia telangiectasia mutated (ATM) expression.** A compound can be tested as follows: A test compound (a Dihydropyrazino-Pyrazine Compound set forth herein) is dissolved in dimethyl sulfoxide (DMSO) to prepare a 10 mM stock solution. A serial titration is performed to produce a working concentration range of 1.5 μ M to 10 mM. Aliquots to produce final concentrations of 1.5 nM to 10 μ M are spotted via an acoustic dispenser (EDC ATS-100) into an empty 384-well plate. The test compound is spotted in a 10-point serial dilution fashion (3-fold dilution) in duplicate within the plate. The DMSO concentration is kept constant for a final assay concentration of 0.1% DMSO. Plates are replicated for use with different cell lines and testing periods. After compound plate replication, all plates are sealed (Agilent ThermoLoc) and stored at -20°C for up to 1 month. When ready for testing, plates are removed from the freezer, thawed, and unsealed just prior to the addition of the test cells. Prior to testing, cells are grown and expanded in culture flasks to provide sufficient amounts of starting material. Cells are then diluted to the appropriate densities and added directly to the test-compound-spotted 384-well plates. Cells are allowed to grow for 72 hours at 37 °C/5% CO₂. At the time when test compounds are added (t_0), initial cell numbers are assessed via a viability assay (Cell Titer-Glo) by quantifying the level of luminescence generated by ATP present in viable cells. After 72 hours, cell viability of test-compound-treated cells is assessed via Cell Titer-Glo and

luminescence measurement. Cell lines are assayed for growth inhibition by the test compound in at least 3 independent tests. A control cell line is included in each of the assays. The test compound response against this control cell line is monitored closely to enable comparison of the data generated through the assay period. All data are normalized and presented as a percentage of the DMSO-treated cells. Results are then expressed as a GI₅₀ value. The GI₅₀ value corrects for the cell count at time zero.

[00163] Apoptosis assay for HNSCC lines characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function. Prior to testing, cells are grown and expanded in culture flasks to provide sufficient amounts of starting material. Cells are then diluted to their desired densities and added directly to test-compound-spotted 384-well plates. Cells are allowed to grow for 24 hours in 5% CO₂ at 37°C. The apoptotic response is assessed by quantifying the activities of caspase 3 and caspase 7 (Caspase 3/7-Glo) in treated cells and control cells at the 24-hour time point. All data is normalized and represented as a value relative to the DMSO-treated cells. Results are then expressed as CalX, which is the minimum test compound concentration required to double the levels of caspase 3/7 relative to those of the DMSO-treated cells during their treatment period.

5.2.3 In vivo Assays:

[00164] Xenograft studies are conducted with different HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function tumor-bearing mice. SCID or nude mice are inoculated subcutaneously with HNSCC cells characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression, or function in the flank region above the right hind leg. Following inoculation of the animals, the tumors are allowed to grow to about 150 - 200 mm³ prior to randomization. A test compound is formulated in 0.5% CMC and 0.25% Tween 80 in water (as a suspension). The animals are orally administered vehicle (CMC-Tween) or a test compound once daily (QD) for 26 - 40 days. Doses of a test compound can range between 1 and 5 mg/kg. Tumors are measured twice a week using calipers

and tumor volumes are calculated using the formula of $W^2 \times L / 2$ (wherein “W” is tumor width and “L” is tumor length).

5.2.4 Clinical Study

[00165] Phase 1B, Multi-Center, Open-Label, Dose Finding Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Efficacy of Compound 1 Administered Orally to Subjects with HNSCC Characterized by Deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function

[00166] Study Objectives.

[00167] The primary objectives of the study are to determine: (1) the safety and tolerability of Compound 1; (2) the non-tolerated dose (NTD) of Compound 1; (3) the maximum tolerated dose (MTD) of Compound 1; and (4) the pharmacokinetics (PK) of Compound 1, when Compound 1 is administered orally to patients having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

[00168] The secondary objectives of the study are to: (1) evaluate the extent of inhibition of phosphorylation of S6RP and/or 4E-BP1 for mTORC1 activity and AKT and/or other relevant biomarkers for mTORC2 activity in blood, skin and/or tumor biopsies/aspirates, when available before and during treatment with Compound 1; (2) evaluate the inhibition of DNA-dependent protein kinase (DNA-PK) activity in skin samples irradiated by UV light, and/or tumor biopsies/aspirates using pDNA-PK S2056 and/or other relevant biomarkers for DNA damage pathways before and during Compound 1 treatment; and (3) evaluate the efficacy of Compound 1.

[00169] The exploratory objectives of the study are to: (1) evaluate glucose homeostasis during Compound 1 treatment; (2) explore the relationship between Compound 1 exposure in blood and tumor with response (inhibition of mTOR and DNA-PK biomarkers); (3) explore the relationship between Compound 1 exposure in blood and tumor with clinical outcomes and adverse events (AEs); (4) explore the effect of Compound 1 on biomarkers, including apoptosis

and/or inhibition of proliferation, in pre- and during-treatment tumor biopsies, when available; (5) investigate whether responses to Compound 1 could be explained by differences in protein expression or genetic variation including, but not limited to, investigation of components of the PI3K/AKT/mTOR pathway, DNA damage response pathways, and the p53 family of genes; (6) identify the principal metabolites of Compound 1 in plasma and urine; and (7) analyze recovered CTC for molecular abnormalities and changes in mTOR and DNA-PK biomarkers.

[00170] Study Design.

[00171] In this study, Compound 1 is administrated orally to patients having HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function.

[00172] Subjects will start Compound 1 at 10 mg BID. Subjects will be evaluated for safety and antitumor activity after every two/three cycles of therapy.

[00173] Study Population.

[00174] Men and women, 18 years or older, with HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function, and including subjects who have progressed on (or not been able to tolerate) standard anticancer therapy, or for whom no other approved therapy exists.

[00175] Inclusion Criteria.

[00176] Inclusion criteria are: (1) understand and voluntarily sign an informed consent document before any study-related assessments/procedures are conducted; (2) men and women, 18 years or older, with histological or cytological confirmation of HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function; (3) consent to screening tumor biopsy; (4) ECOG PS of 0 or 1; (5) the following laboratory values: (i) absolute neutrophil count (ANC) $\geq 1.5 \times 10^9/L$; (ii) hemoglobin (Hgb) ≥ 9 g/dl; (iii) platelets (plt) $\geq 100 \times 10^9/L$; (iv) potassium within normal range, or correctable with supplements; (v) AST/SGOT and ALT/SGPT $\leq 2.5 \times$ Upper Limit of Normal (ULN) or $\leq 5.0 \times$ ULN if liver tumor is present; (vi) serum total bilirubin $\leq 1.5 \times$ ULN; (vii) serum creatinine $\leq 1.5 \times$ ULN, or 24-hr clearance ≥ 50 mL/min; and (viii) negative serum or urine pregnancy test within 72 hrs before starting study treatment in females of childbearing potential; (6) able to adhere to the study visit schedule and other protocol requirements; (7)

subject consent to retrieve formalin-fixed, paraffin-embedded (FFPE) archival tumor tissue, either in tumor blocks or sectioned/mounted specimens; (8) histologically-confirmed HNSCC characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, or loss of ATM expression or function; (9) locally advanced, recurrent or metastatic, squamous cell carcinoma of the head and neck not amenable to curative surgical resection; (10) measurable disease according to for example, RECIST v1.1; (11) must have received at least one prior line of platinum-based chemotherapy; and (12) consent to undergo paired (screening and on-treatment) tumor biopsies. Cohort may be expanded to enroll a minimum of 5 subjects with tumors with DNA-PK overexpression.

[00177] Length of Study.

[00178] Subjects start Compound 1 with 10 mg BID, receiving daily treatment in 28-day cycles. Compound 1 may be discontinued when there is evidence of tumor progression, but subjects can continue to receive study drug as long as the investigator considers they are deriving benefit. Therapy is discontinued when there is unacceptable toxicity or the subject decides to withdraw from the study.

[00179] Enrollment is expected to take about 30 months to complete. Extended treatment for responding subjects and follow-up may last another 3-6 months.

[00180] Study Treatments.

[00181] Compound 1 will be provided as capsules for oral administration or via an intragastric/jejunal feeding tube, if applicable. Most subjects will start Compound 1 at 10 mg BID.

[00182] Overview of Efficacy Assessments.

[00183] All treated subjects will be included for the efficacy analysis. The primary efficacy variable is tumor response, based on investigator assessment using Response Evaluation Criteria in Solid Tumors (for example, RECIST 1.1) for HNSCC. Supplementary efficacy variables (e.g., CTC quantification) will also be examined.

[00184] Overview of Safety Assessments.

[00185] Primary and exploratory safety variables for this study include AEs, comprehensive panels of clinical laboratory variables (including hematology, chemistry, immunology and thyroid function, and analytes assessing glucose homeostasis), 12-lead

triplicate electrocardiograms (ECGs) centrally analyzed, left ventricle ejection fraction (LVEF) assessments, physical examinations, ECOG performance status (ECOG PS) and vital signs.

[00186] The Safety Review Committee (SRC) will determine the appropriate dose, doses, or schedule. The SRC will continue to review safety data regularly and make recommendations about the study continuation, as appropriate.

[00187] **Overview of Pharmacokinetic Assessments.**

[00188] The PK profiles of Compound 1, and any major metabolites detected, will be determined from serial blood and urine collections, including tumor tissue when available, and correlated with PD outcomes, where possible.

[00189] **Overview of Pharmacodynamic Assessments.**

[00190] Exploratory endpoints include mTOR and DNA-PK biomarker inhibition in circulating blood cells, and other tumor cells and/or tissue and aspirates, as available, UV-stimulated DNA-PK activity in skin, histopathologic response and correlations with pharmacogenomic findings. Paired (pre- and during-treatment) tumor biopsies are performed in most subjects with tumor lesions determined by the Investigator to be amenable to biopsy. Analysis will also include apoptosis and proliferation biomarkers in blood, skin, and/or tumor samples when available.

[00191] **Overview of Predictive Biomarker Assessments.**

[00192] Mutation and/or protein level of components in relevant pathways including, but not limited to, PI3K/mTOR, DNA damage repair and p53 pathway are explored for identification of potential predictive biomarkers.

[00193] In certain embodiments, patients undergoing the clinical protocol provide herein show a positive tumor response, such as inhibition of tumor growth or a reduction in tumor size. In certain embodiments, patients undergoing the clinical protocol provide herein show an improvement in the Response Evaluation Criteria in Solid Tumors (for example RECIST 1.1).

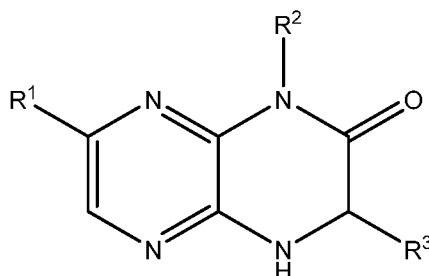
[00194] A number of references have been cited, the disclosures of which are incorporated herein by reference in their entirety. The embodiments disclosed herein are not to be limited in scope by the specific embodiments disclosed in the examples which are intended as illustrations of a few aspects of the disclosed embodiments and any embodiments that are functionally equivalent are encompassed by the present disclosure. Indeed, various modifications of the

embodiments disclosed herein are in addition to those shown and described herein will become apparent to those skilled in the art and are intended to fall within the scope of the appended claims.

CLAIMS

What is claimed is:

1. A method for treating head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



(I)

and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclalkyl;

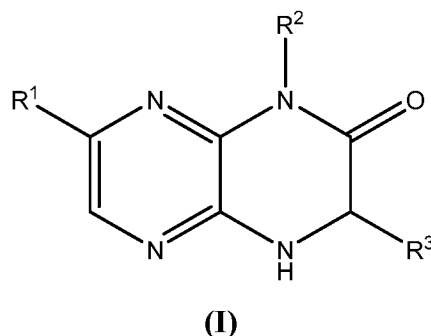
R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,

provided the Dihydropyrazino-Pyrazine Compound is not 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

2. A method for treating head and neck squamous cell carcinoma characterized by loss of ataxia telangiectasia mutated expression, comprising administering an effective amount of

a Dihydropyrazino-Pyrazine Compound to a patient having head and neck squamous cell carcinoma characterized by loss or mutation of the gene encoding ATM, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclalkyl;

R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,

provided the Dihydropyrazino-Pyrazine Compound is not 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

3. The method of claim 1 or 2, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated.

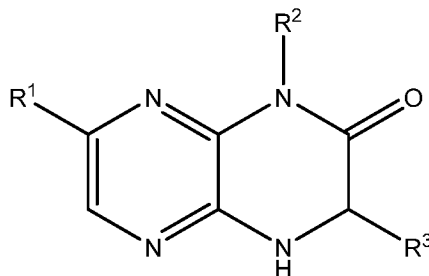
4. The method of claim 3, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated due to PTEN loss, a PIK3Ca mutation or EGFR overexpression, or a combination thereof.

5. The method of claim 1 or 2, wherein said patient is administered about 0.5 mg/day to about 128 mg/day of a Dihydropyrazino-Pyrazine Compound.

6. The method of claim 5, wherein said patient is administered 0.5 mg/day, 1 mg/day, 2 mg/day, 4 mg/day, 8 mg/day, 16 mg/day, 20 mg/day, 25 mg/day, 30 mg/day, 45 mg/day, 60 mg/day, 90 mg/day, 120 mg/day or 128 mg/day of a Dihydropyrazino-Pyrazine Compound.

7. The method of claim 1 or 2, wherein said patient is administered a unit dosage form comprising 0.1 mg, 0.25 mg, 0.5 mg, 1 mg, 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 35 mg, 45 mg, 50 mg, 60 mg, 70 mg, 75 mg, 100 mg, 125 mg, 140 mg, 150 mg, 175 mg, 200 mg, 250 mg, 280 mg, 300 mg, 350 mg, 400 mg, 500 mg, 560 mg, 600 mg, 700 mg, 750 mg, 800 mg, 1000 mg or 1400 mg of a Dihydropyrazino-Pyrazine Compound.

8. A method for achieving the Response Evaluation Criteria in Solid Tumors (RECIST 1.1) of complete response, partial response or stable disease in a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



(I)

and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

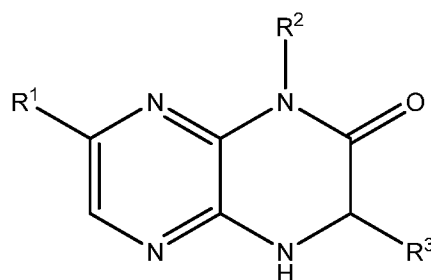
R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclylalkyl;

R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,

provided the Dihydropyrazino-Pyrazine Compounds is not 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

9. A method for achieving the Response Evaluation Criteria in Solid Tumors (RECIST 1.1) of complete response, partial response or stable disease in a patient having head and neck squamous cell carcinoma characterized by loss or mutation of the gene encoding ATM, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



(I)

and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclalkyl;

R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

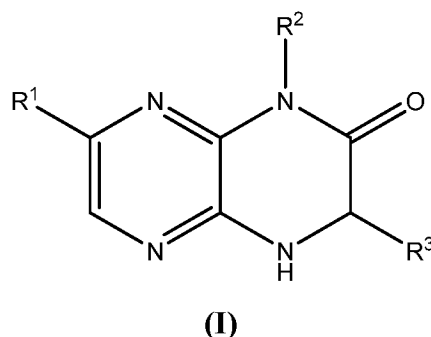
R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,

provided the Dihydropyrazino-Pyrazine Compounds is not 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

10. The method of claim 8 or 9, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated.

11. The method of claim 10, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated due to PTEN loss, a PIK3Ca mutation or EGFR overexpression, or a combination thereof.

12. A method for inhibiting phosphorylation of S6RP, 4E-BP1 and/or AKT in a biological sample of a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient and comparing the amount of phosphorylated S6RP, 4E-BP1 and/or AKT in a biological sample of said patient obtained prior to and after administration of said Dihydropyrazino-Pyrazine Compound, wherein less phosphorylated S6RP, 4E-BP1 and/or AKT in said biological sample obtained after administration of said Dihydropyrazino-Pyrazine Compound relative to the amount of phosphorylated S6RP, 4E-BP1 and/or AKT in said biological sample obtained prior to administration of said Dihydropyrazino-Pyrazine Compound indicates inhibition, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclylalkyl;

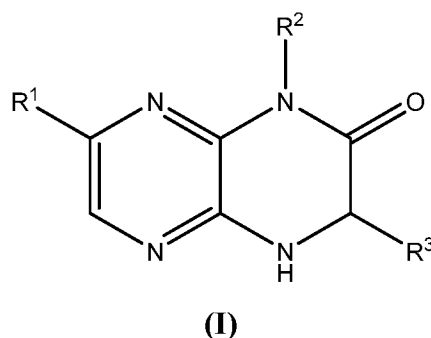
R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclylalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,
provided the Dihydropyrazino-Pyrazine Compounds do not include
7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

13. The method of claim 12, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated.

14. The method of claim 13, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated due to PTEN loss, a PIK3Ca mutation or EGFR overexpression, or a combination thereof.

15. A method for inhibiting DNA-dependent protein kinase (DNA-PK) activity in a skin sample of a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient and comparing the amount of phosphorylated DNA-PK in a biological sample of said patient obtained prior to and after administration of said Dihydropyrazino-Pyrazine Compound, wherein less phosphorylated DNA-PK in said biological sample obtained after administration of said Dihydropyrazino-Pyrazine Compound relative to the amount of phosphorylated DNA-PK in said biological sample obtained prior to administration of said Dihydropyrazino-Pyrazine Compound indicates inhibition, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclalkyl;

R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

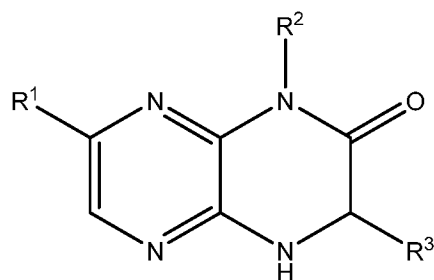
R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,

provided the Dihydropyrazino-Pyrazine Compounds is not 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

16. The method of claim 15, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated.

17. The method of claim 16, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated due to PTEN loss, a PIK3Ca mutation or EGFR overexpression, or a combination thereof.

18. A method for measuring inhibition of phosphorylation of S6RP, 4E-BP1 or AKT in a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient, measuring the amount of phosphorylated S6RP, 4E-BP1 or AKT in said patient, and comparing said amount of phosphorylated S6RP, 4E-BP1 or AKT to that of said patient prior to administration of an effective amount of a Dihydropyrazino-Pyrazine Compound, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



(I)

and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclylalkyl;

R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclylalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

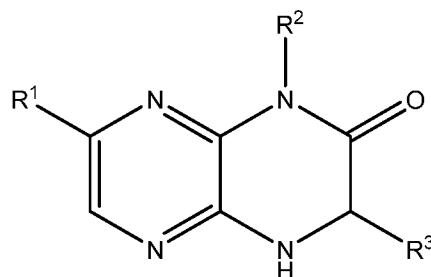
R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,

provided the Dihydropyrazino-Pyrazine Compounds is not 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

19. The method of claim 18, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated.

20. The method of claim 19, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated due to PTEN loss, a PIK3Ca mutation or EGFR overexpression, or a combination thereof.

21. A method for measuring inhibition of phosphorylation of DNA-PK S2056 in a skin sample of a patient having head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, comprising administering an effective amount of a Dihydropyrazino-Pyrazine Compound to said patient, measuring the amount of phosphorylated DNA-PK S2056 present in the skin sample and comparing said amount of phosphorylated DNA-PK S2056 to that in a skin sample from said patient prior to administration of an effective amount of a Dihydropyrazino-Pyrazine Compound, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



(I)

and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclylalkyl;

R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclylalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

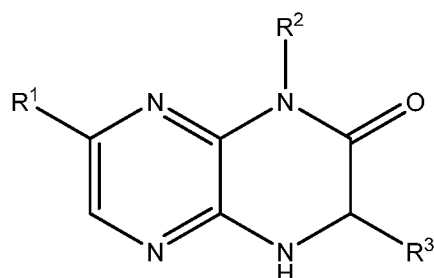
R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl,

provided the Dihydropyrazino-Pyrazine Compounds is not 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

22. The method of claim 21, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated.

23. The method of claim 22, wherein the head and neck squamous cell carcinoma is that in which the PI3K/mTOR pathway is activated due to PTEN loss, a PIK3Ca mutation or EGFR overexpression, or a combination thereof.

24. A kit comprising a Dihydropyrazino-Pyrazine Compound and means for monitoring patient response to administration of said Dihydropyrazino-Pyrazine Compound, wherein said patient has head and neck squamous cell carcinoma characterized by deletion of all or part of chromosome 11q or loss or mutation of the gene encoding ATM, wherein the Dihydropyrazino-Pyrazine Compound is a compound of formula (I):



(I)

and pharmaceutically acceptable salts, clathrates, solvates, stereoisomers, tautomers, prodrugs, metabolites and isotopologues thereof, wherein:

R^1 is substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted aryl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, or substituted or unsubstituted heterocyclalkyl;

R^2 is H, substituted or unsubstituted C_{1-8} alkyl, substituted or unsubstituted cycloalkyl, substituted or unsubstituted heterocyclyl, substituted or unsubstituted heterocyclalkyl, substituted or unsubstituted aralkyl, or substituted or unsubstituted cycloalkylalkyl;

R^3 is H, or a substituted or unsubstituted C_{1-8} alkyl, provided the Dihydropyrazino-Pyrazine Compounds is not 7-(4-hydroxyphenyl)-1-(3-methoxybenzyl)-3,4-dihydropyrazino[2,3-b]pyrazin-2(1H)-one.

INTERNATIONAL SEARCH REPORT

International application No
PCT/US2014/034303

A. CLASSIFICATION OF SUBJECT MATTER INV. A61K31/4985 A61P35/00 ADD.		
According to International Patent Classification (IPC) or to both national classification and IPC		
B. FIELDS SEARCHED Minimum documentation searched (classification system followed by classification symbols) A61P A61K		
Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched		
Electronic data base consulted during the international search (name of data base and, where practicable, search terms used) EPO-Internal, WPI Data, BIOSIS, CHEM ABS Data, EMBASE		
C. DOCUMENTS CONSIDERED TO BE RELEVANT		
Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
Y	WO 2010/022243 A1 (US HEALTH [US]; GUTKIND J SILVIO [US]; AMORNPHEMOLTHAM PANOMWAT [US];) 25 February 2010 (2010-02-25) claims -----	1-24
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<div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Further documents are listed in the continuation of Box C. <input checked="" type="checkbox"/> See patent family annex. </div>		
<div style="display: flex;"> <div style="flex: 1;"> <p>* Special categories of cited documents :</p> <p>"A" document defining the general state of the art which is not considered to be of particular relevance</p> <p>"E" earlier application or patent but published on or after the international filing date</p> <p>"L" document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)</p> <p>"O" document referring to an oral disclosure, use, exhibition or other means</p> <p>"P" document published prior to the international filing date but later than the priority date claimed</p> </div> <div style="flex: 1;"> <p>"T" later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention</p> <p>"X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone</p> <p>"Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art</p> <p>"&" document member of the same patent family</p> </div> </div>		
Date of the actual completion of the international search <div style="text-align: center; font-size: 1.2em;">13 June 2014</div>		Date of mailing of the international search report <div style="text-align: center; font-size: 1.2em;">25/06/2014</div>
Name and mailing address of the ISA/ European Patent Office, P.B. 5818 Patentlaan 2 NL - 2280 HV Rijswijk Tel. (+31-70) 340-2040, Fax: (+31-70) 340-3016		Authorized officer <div style="text-align: center; font-size: 1.2em;">Lemarchand, Aude</div>

INTERNATIONAL SEARCH REPORT

International application No
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C(Continuation). DOCUMENTS CONSIDERED TO BE RELEVANT		
Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
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Y	OLEKSANDR EKSHYYAN ET AL: "Pharmacodynamic evaluation of temsirolimus in patients with newly diagnosed advanced-stage head and neck squamous cell carcinoma", HEAD & NECK, vol. 32, no. 12, 1 December 2010 (2010-12-01), pages 1619-1628, XP055061550, ISSN: 1043-3074, DOI: 10.1002/hed.21374 abstract -----	1-24
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