

# Sylvester Precision Medicine Basket Trials and Phase I Trials

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# NCI- MATCH

Agent	Mutation
Afatinib	EGFR activating mutation
Crizotinib	MET exon 14 deletion
Osimertinib	EGFR T790M or rare activating mutation
Crizotinib	ALK translocation
Crizotinib	ROS1 translocation or inversion
TAK228 (MLN0128)	mTOR
TAK228 (MLN0128)	TSC1 or TSC2
Trametinib	GNAQ or GNA11 mutation
Vismodegib	SMO or PTCH1 mutation
Sunitinib malate	cKIT exon 9, 11, 13, or 14 mutation
Palbociclib (Ibrance)	CDK4 and CDK6 amplifications
LOXO-101	NTRK1, 2, or 3 fusion
Copanlisib	Deleterious PTEN (NGS) and PTEN pos (by IHC)

- MATCH is a multi-arm basket trial
  - Disease-type agnostic
  - Enrollment is based on mutations
- Combination of FDA approved and experimental drugs
- MATCH is a trial adapting to results
  - After some findings arms have close and others have opened

Original arms still open

# MATCH: New and Opening Arms

- **5 Arms opened in July 2018**
  - Data from ASCO '18 led MATCH to modify their arms, and added 2 new drugs
  
- **Three more arms are slated to open December 2018**

Agent	Mutation
<b>Erdafitinib</b>	FGFR amp
<b>Erdafitinib</b>	FGFR mutations or fusions
<b>Copanlisib</b>	PIK3CA
<b>Copanlisib</b>	PTEN loss (by IHC) w/ PIK3CA mutation
<b>Copanlisib</b>	Deleterious PTEN (NGS) and PTEN pos (by IHC)

Agent	Mutation
<b>AZ1775</b>	TP53 mutation and MYC amp
<b>Ipatasertib</b>	AKT mutation
<b>Ulixertinib</b>	Non-V600 BRAF

# ASCO TAPUR

Agent	Mutations
<b>Dasatinib (Sprycel)</b>	Bcr-abl, SRC, KIT, PDGFRB, EPHA2, FYN, LCK, YES1 mutations
<b>Nivolumab and Ipilimumab (Opdivo and Yervoy)</b>	MSIH, <u>high</u> mutational load MLH1, MSH2, MSH6, PMS2, EPCAM, BRCA1, BRCA2, ATM, MSH3, PMS1, MLH3, EXO1, RFC1-5, PCNA, RPA1-4, SSBP1
<b>Olaparib (Lynparza)</b>	BRCA1/BRCA2 inactivating mutations; ATM mutations or deletions
<b>Pembrolizumab (Keytruda)</b>	POLE/POLD1, high mutational load over 9 mut/Mb
<b>Regorafenib (Stivarga)</b>	RET, VEGFR1, VEGFR2, VEGFR3, KIT, PDGFR $\beta$ , RAF-1, BRAF mutations/amplifications
<b>Trastuzumab and Pertuzumab (Herceptin and Perjeta)</b>	ERBB2/ERBB3 amplifications, overexpression, or documented ERBB2 pathogenic mutations
<b>Vemurafenib and Cobimetinib (Zelboraf and Cotellic)</b>	BRAFV600 mutations

- TAPUR is also a multi-arm basket trial
  - Enrollment is based on mutations
  - Multiple disease types eligible on each arm
  - Multiple mutations eligible per arm
- FDA approved treatments only
  - investigating new indications for drugs already available
- Sponsored by major pharmaceutical companies

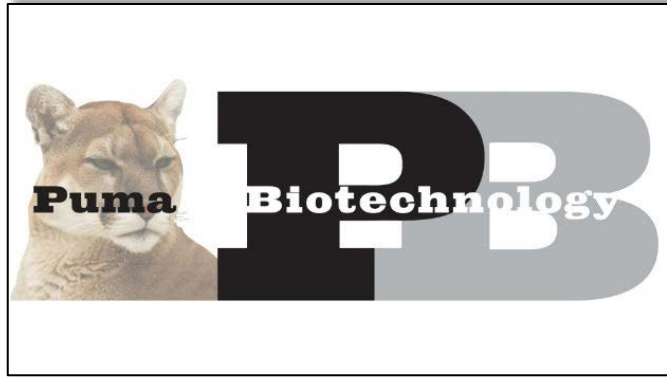
# TAPUR: Adapting to results

- As results are returned arms are modified or completely closed to reflect discovered efficacy of the agents
- These arms are still open but have limited their cohorts to disease types that may benefit the most, based on findings

Agent	Cohorts open
<b>Cetuximab (Erbix)</b>	Ovarian Ca. - KRAS, NRAS and BRAF wildtype
<b>Palbociclib (Ibrance)</b>	Peritoneum, retroperitoneum - CDK4 amp Lung – CCND1 amp Head and Neck, ovarian - CDKN2A loss or mutation Soft tissue sarcoma – CDK4 amp, CDKN2A loss or mutation
<b>Sunitinib (Sutent)</b>	Breast cancer – FGFR1, FLT3 mutations or amp Bone and Cartilage, Colorectal – FGFR1 Lung, Gall bladder, Bile duct – FGFR2

# Additional Precision Medicine Phase II Basket Trials

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## ■ PUMA Summit Trial

- Targeting: ERBB2/4 (HER2/4), EGFR (exon 18)
- Agent: Neratinib
- SDGs: Colon cancer, lung cancer, breast cancer and bladder cancer



## ■ BluePrint RET Trial

- Targeting: RET mutated cancers
- Agent: BLU-667 (RETi)
- SDGs: Solid Tumors

# Phase I Clinical Trials

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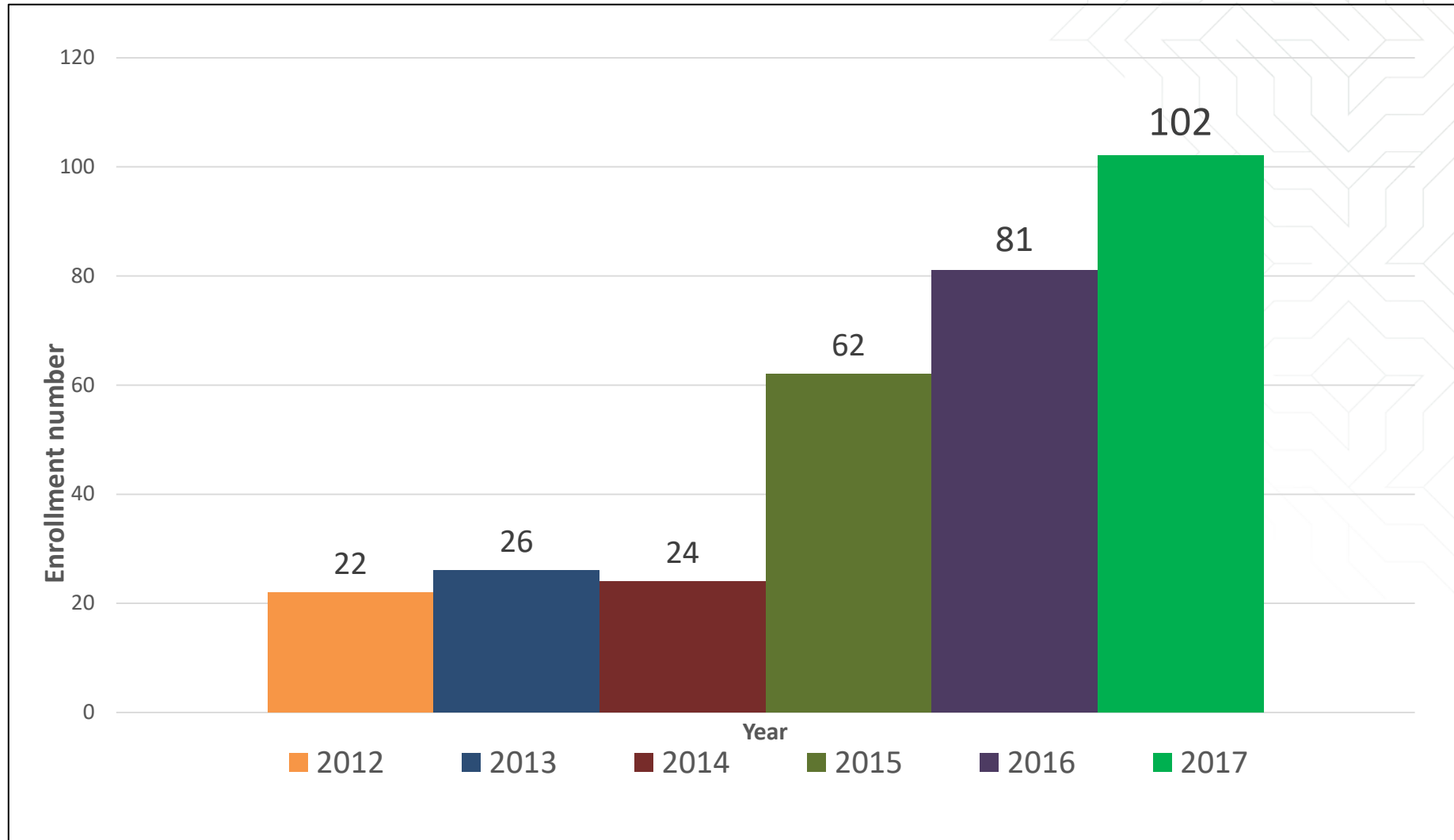
# Phase I Clinical Trials

- Sylvester's robust clinical trial portfolio offers options to late stage cancer patients
- Enrollment in phase I is strong and Sylvester is also very efficient at activation of new trails
- Phase I collaborates with Precision Medicine to identify clinical trials that may provide benefit to our patient population

Agent	Indications
<b>PLX9486 (c-KIT inhibitor) + Sunitinib (Part 2e)</b>	Solid tumors (including GIST)
<b>Toca 511 (retroviral replicating vector) + Toca FC (flucytosine)</b>	Advanced solid tumors or lymphoma
<b>AGEN1884 (CTLA-4 inhibitor)</b>	Advanced / Refractory tumors
<b>VSV-IFN<math>\beta</math>-NIS (modified vesicular stomatitis virus)</b>	Refractory solid tumors
<b>Corvus: CPI-006 (single agent) or in combo w/ CPI-444 or Pembro</b>	Advanced solid tumors
<b>Celldex: CDX014 anti-CD40 monoclonal antibody</b>	Advanced Solid Tumors
<b>FORMA: FT-2102 monotherapy or combination (advanced solid tumors + gliomas w/ IDH1 mutation)</b>	All R/R Solid Tumors



# Phase I Enrollment 2012 -2017



# Thank You

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