Cisbelimab, an anti-PD-L1 antibody: Preliminary Safety and Efficacy Results from a Global, Multicohort 1 Phase 1 Clinical Trial

Background

- High affinity, fully-human IgG1 monoclonal antibody (indicated for use in concert with previously approved high-dose IL-2 therapy) for the treatment of non-small cell lung cancer (NSCLC) and a pivotal cohort with locally advanced or metastatic cutaneous squamous cell carcinoma (cSCC).
- Present at the Society for Immunotherapy of Cancer (SITC) 35th Anniversary Annual Meeting.

Key Exclusion Criteria

- cSCC cohort: unresectable locally advanced or metastatic cSCC not amenable to local therapy.

Key Inclusion Criteria

- Study CK-301-101 (NCT03212404) is a global, multicenter, multicohort trial enrolling patients with select NSCLC and cSCC.

Objective

- In the cSCC cohort, ORR by investigator assessment was 51.1% (95% CI: 36.1, 66.0).
- In the NSCLC cohort, ORR by investigator assessment was 44.0% (95% CI: 24.4, 65.1).
- Median DoR and PFS were 15.3 and 10.3 months, respectively.

Primary

- To evaluate the efficacy of cisbelimab in NSCLC and cSCC by measuring objective response rate (ORR).

Secondary

- To evaluate the safety and tolerability of cisbelimab in patients with advanced cancers.

Methods

- Patients with Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1.
- NSCLC cohort: Stage IV NSCLC with high tumor proportion score (10% PD-L1 tumor expression as determined by immunohistochemistry, with no prior systemic treatment for advanced/metastatic NSCLC and no EGFR activating mutation or ALK translocation.
- cSCC cohort: unresectable locally advanced or metastatic cSCC not amenable to local therapy.

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Study Design

- Protocol treatment: 800 mg q2w [n=112], 1200 mg q3w [n=9].
- Patients received cisbelimab administered as a fixed dose of 800 mg every two weeks (Q2W) or 1200 mg every three weeks (Q3W) until confirmed and worsening disease progression or clinical deterioration, followed by post-treatment follow-up.
- Tumor assessments by best assessment using RECIST v1.1 are conducted every 8 weeks for the initial 32 weeks and every 4 weeks thereafter.

Results

- Safety and Efficacy Results: In the cSCC cohort, deep reductions in target lesions were observed, with 83.3% of responses ongoing at 25.8 months and ongoing.
- In the cSCC cohort, ORR by investigator assessment was 51.1% (95% CI: 36.1, 66.0) in locally advanced and metastatic patients, including 5 complete responses. Median DoR was 15.3 months and PFS was not reached.

Conclusions

- One hundred twenty-three patients with advanced cancers have been enrolled and treated with cisbelimab.
- Treatment-related adverse events (TRAEs) are summarized in Table 2.
- The most common TRAEs included fatigue (n=19, 15.4%), rash (n=17, 13.8%). Two patients (1.6%) experienced grade 5 pneumonitis. No reported events of colitis or hepatitis.
- Grade 5 TRAEs occurred in six patients (4.9%), Events that occurred in more than one patient were anemia and fatigue (each n=2, 1.6%, grade 3 only).
- Two patients (1.6%) discontinued treatment due to a TRAE.

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