## ASCO 2020 Jack Aiello – Terse Notes

Key Takeaways:

- 1) "Negative" trials showing no benefit using KRd vs VRD for NDMM nor VRd +/- Elo for HR MM. Weekly vs twice-weekly Carfilzomib equally effective.
- 2) CAR-T still showing promising results KarMMa (bb2121), EVOLVE, CARTITUTE. Interesting poster comparing KarMMa to real world.
- Stamina LT follow-up showed tandem benefit for HR and maintenance till progression benefit. Otherwise no differences among SCT-only vs adding Consolidation or 2<sup>nd</sup> SCT.
- 4) Selinexor (Xpovio)-Vd better than Vd, side effects considerable but manageable
- 5) New drugs progressing Belamaf (GSK ADC), Teclistamab (Bite), Sel in other combinations, more
- 6) MRD via Mass-spec
- 7) Renal

## ASCO URL:

https://meetinglibrary.asco.org/browse-meetings/2020%20ASCO%20Virtual%20Scientific%20Program

## Color Key Codes

Oral: Plenary, 100, 8500-8508; Posters: 8510-8520, 8525-8540;TSP: Trials in Progress Green = CAR-T or Bi-specific T-cell Engager; Purple = CD38; Red = Belamaf ADC from GSK; Blue-My notes

Penary-LBA-3 (ENDURANCE E1A11): KRd vs VRd for 36 wks followed by indefinite vs 2 yr Rev maintenance in Std risk NDMM w/o intent to transplant Ph3; Conclusions after Induction- 1) no PFS improvement, both med PFS = 34 mos; 2) 3 yr OS similar about 85%; 3) more cardio-pulmonary and renal toxicity with KRd; 4) more neuropathy with VRd. S Kumar Video Slides KRd arm had slightly deeper responses. Discussion by Dr J Berdeja: What about HR MM? What about KRd vs VRd as induction for SCT? Unanswered questions. Treatment completion 61% vs 41%. Cost \$315K vs \$216K.

100: Teclistamab (JNJ) bispecific BCMA x CD3 antibody that induces T-cell cytotoxicity against BCMAexpressing MM cells. RRMM, Ph1; 67% ORR for N=12 at highest weekly dose; S Usmani Video Slides 4 of 5 evaluable pts MRD- at 10<sup>-6</sup>

8500: CELMoD CC-92480 + dex for RRMM Ph 1/2; 55% ORR at recommended dose. P Richardson Video Slides At RP2D, 7 of 11 pts were triple-class-refractory, Rev-Pom resistant, neutropenia

8501 (BOSTON): Sel-Vd weekly vs Vd twice/wk RRMM Ph 3: med PFS 14 vs 9 mos; ORR 76% vs 62%; med OS not reached vs 25 mos. Major AE differences thrombocytopenia, fatigue, nausea; M Dimopolous Video: Sel was 100mg once/wk and neuropathy less in SVd arm but more non-hema events.

8502 (DREAMM-6): ARM A: BelaMaf ADC + Rd; ARM B: BelaMaf ADC + Vd for RRMM Pts >=1 prior therapy, Ph 1/2. Very early. Corneal events (Karatopathy) and thrombocytopenia were manageable. A Nooka Video Slides Study focused on ARM B, N=18, ORR 78% where prior trials Vd only for same pts showed ORR 50-63%

8503 (KarMMa): Ide-cel (bb2121) CAR-T for RRMM Ph 2, prior IMID, PI, CD38 mAB. ORR 73%, med PFS 8.6 mos, but 82% and 12 mos at target dose (450M cells). N. Munshi/BMS Video For pts achieving CR/sCR, median PFS 20.2 mos. Overall median OS was 19.4 mos for all pts but no plateau.

8504 (EVOLVE): Orva-cel (Juno/BMS) CAR-T for RRMM Ph 1/2, prior IMID, PI, CD38 mAB. ORR 91%. S Mailankody/Juno (part of BMS) Video ORR across 3 dose levels 92%, 84% MRD- (10<sup>-5</sup>) at month 3 but data relatively immature. Recommended dose 600M.

8505 (CARTITUDE-1): JNJ-4526 CAR-T in RRMM Ph 1b/2; As of Jan 2020, N=29, ORR 100% (sCR 86%, >=VGPR 97%), 9-mo PFS 86%, longest 15 mo, all evaluable pts MRD-. J Berdeja Slides Median follow-up 11.5 mo, 22 of 29 pts alive and progression-free.

8506 (Stamina 07LT): 6-yr follow-up to VRd-Auto-Auto vs VRd-Auto-Consol vs VRd-Auto, all followed by R maintenance, originally designed for fixed 3 yrs but LT offered R till progression. 6 yrPFS/OS the same but PFS benefit of tandem SCT for HR MM. Rev stoppage after 38 mo showed inferior PFS (80% vs 61%) but similar OS. P Hari Video 6-yr PFS about 40% and OS 75%.

8507 (SWOG-1211): VRd +/- Elo (x 8 cycles) followed by maintenance (lower dosage) of the same for High Risk NDMM, Ph2: The addition of Elo to induction and maintenance did not improve patient outcomes. S Usmani Video Data provided after 53 mos of median follow-up.

8508 (GMMG-CONCEPT): Isa-KRd for HR NDMM Ph 2. Induction, SCT or 2 addition induction cycles, consolidation and maintenance (w/o dex). ORR 100% (CR 46%) after induction. MRD flow (10<sup>-5</sup>) to be reported. K Weisel Video Report on first 50 pts. MRD: 31 pts assessed, 20 were MRD- but need0 PFS or OS data.

8510 (STOMP): Sel-Dara-dex RRMM Ph 1b/2: RP2D Sel 100mg once/wk or 60mg twice/wk; ORR 73% in Dara-naïve pts, med PFS 12.5 mo; C Gasparetto Video Poster Small study so far

8513: MRD via Mass Spec vs NGS. MRD assessment by LCMS (liquid-chromatography MS using peripheral blood) appears to reach and exceed sensitivity of MRD by NGS at a depth of  $10^{-5} - 10^{-6}$ ; B Derman Poster These 2 tests may be used in complementary fashion.

8519 (DREAMM-2): BelaMaf ADC (2.5 or 3.4 mg/kg) in RRMM and renal impairment achieved similar efficacy to normal renal pts. H. Lee Poster

8525 (KarMMa-Real World): RW treatment patterns vs KarMMa CAR-T RRMM; No real SoC and responses suboptimal compared with Ide-cel. ORR 32% vs 76%; med PFS 3.5 vs 11.3 mos. Est 1-yr OS 56% vs 80% S Jagganath Video Poster Non-interventional comparison of patients eligible for KarMMa

8526: Twice-weekly KdD56 vs Once weekly KdD70 in RRMM compared Carfilzomib (K) dosage schedules and showed similar ORR and PFS X Leleu Video Once weekly certainly more convenient for patient.

8530 (STOMP): Sel-Car-dex RRMM Ph 1b/2: RP2D Sel 80mg once/wk; ORR 71% (50% CR/VGPR); C Gasparetto Video

8536 (DREAMM-2): BelaMaf ADC (2.5 or 3.4 mg/kg) in RRMM >= 3 lines; study update ORR 32%/35%; 12 mos OS 53%/53% S Lonial Video med PFS 2.8/3.9mos, med OS 14.9/14.0mos; high incidence of eye infections but most recovered after 3 mos (keratopathy). Dose delays common.

8540: Efficacy of Dara in HRMM, meta-analysis of 6 Ph3 trials concluded that adding Dara improved PFS, regardless of backbone (e.g. VMP, Rd, VTd, Vd, Kd) [although note that VRd was not among the backbones]; S Giri Poster

TPS8551 (GO39775): Genentech's BFCR4350A Bi-specific antibody FcRH5 antigen and CD3 antigen on T-cells for RRMM Ph1, in progress; A Cohen Poster Prior CAR-T, Bites, ADC, Other BCMA-targeted therapies allowed.

TPS8552 (DREAMM-5): BelaMaf ADC in Master Protocol combined with other agents, in progress; P Richardson Poster

TPS8554: Veno+dex vs Pom+dex for t(11;14) RRMM Ph 3; in progress; MV Mateos Video Poster

TPS8555: GSK3377794 (a tumor-specifc TCR (T-cell receptor) targeting NY-ESO-1 antigen) +/-Pembrolizumab for RRMM; in progress; A Rapoport Video Poster

TPS8556 (DREAMM-9): BelaMaf ADC + VRd vs VRd in transplant-ineligible NDMM Ph 3, in progress; S Usmani Video Poster