PARIS 2022 ESMO congress

Neoadjuvant Pepinemab in Combination with Nivolumab and/or Ipilimumab in Resectable Stage III Melanoma

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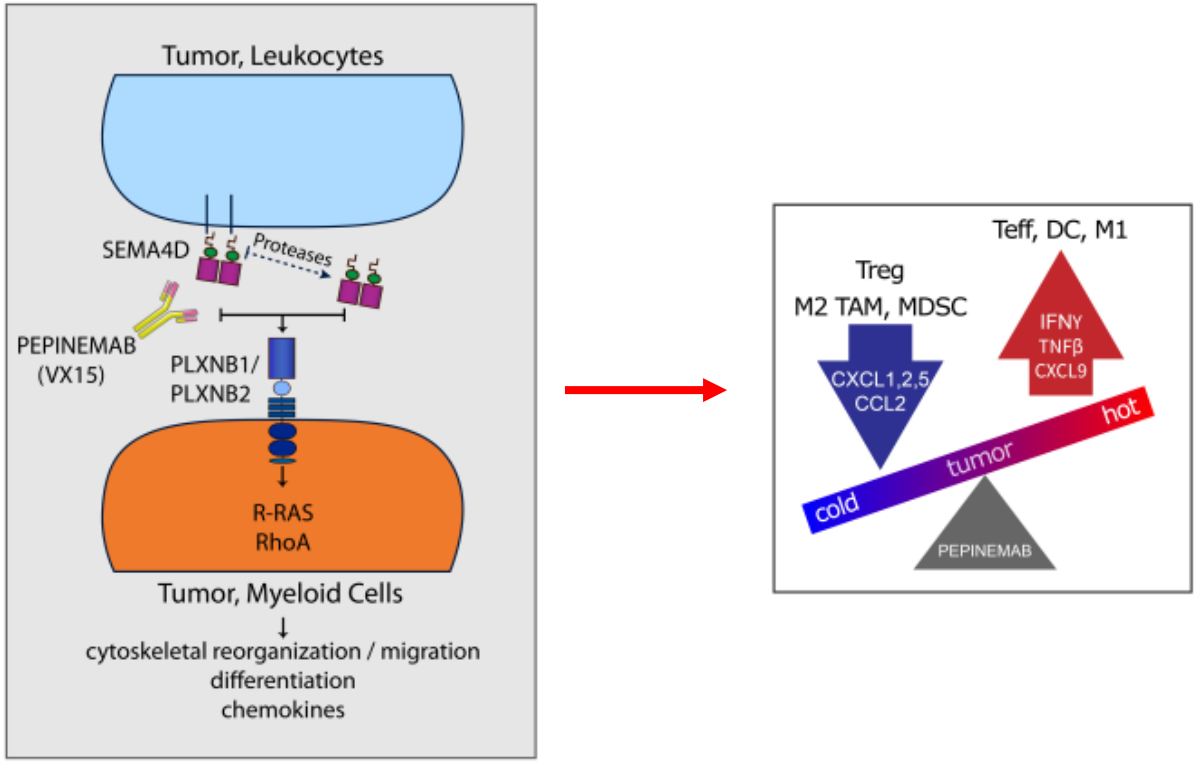
DECLARATION OF INTERESTS

Michael Lowe

Research Funding: Amgen, ***BMS***, Delcath, Merck, Regeneron, Stryker, ***Vaccinex***

Advisory Board: BMS

Background



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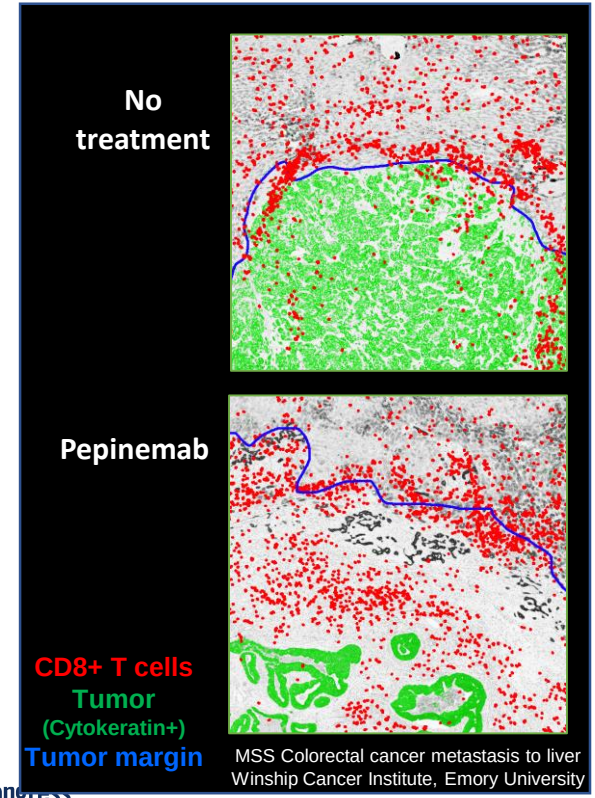

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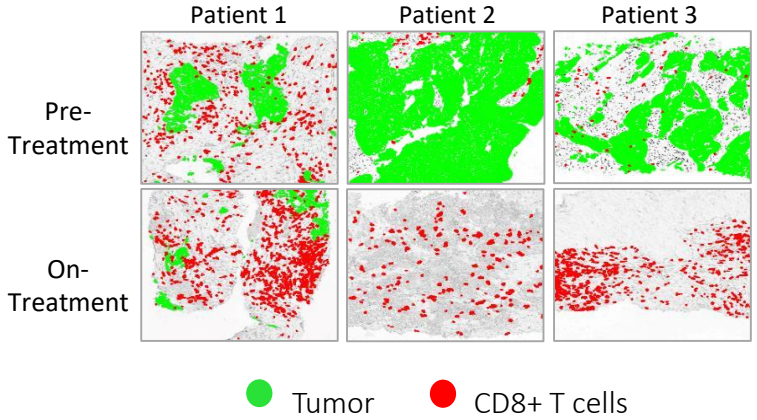
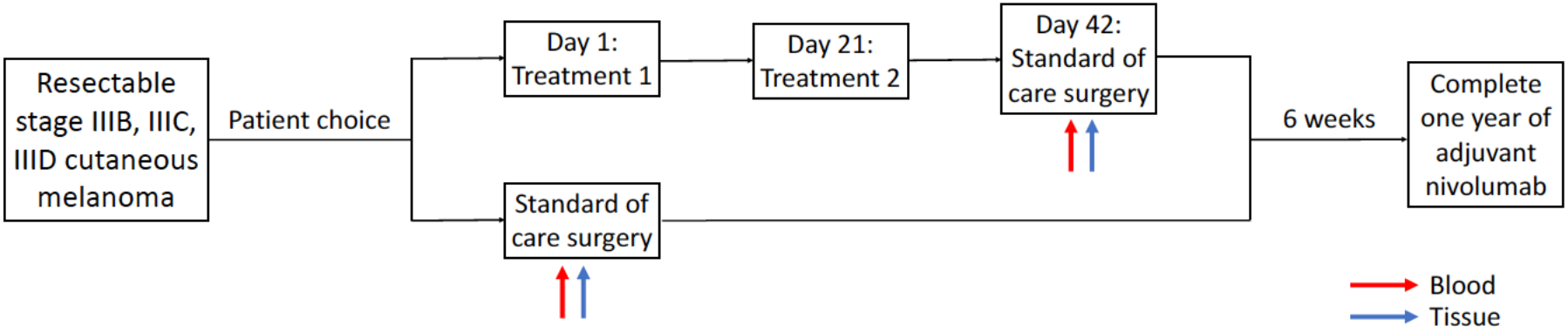
CLINICAL CANCER RESEARCH
HIGHLIGHTS
Selected Articles from This Issue

A Phase Ib/2 Study of Pepinemab in Combination with Avelumab in Advanced Non–Small Cell Lung Cancer

Michael Rahman Shafique[1], Terrence Lee Fisher[2], Elizabeth E. Evans[2], John E. Leonard[2], Desa Rae Electa Pastore[2], Crystal L. Mallow[2], Ernest Smith[2], Vikas Mishra[2], Andreas Schröder[3], Kevin M. Chin[4], Joseph Thaddeus Beck[5], Megan Ann Baumgart[6], Ramaswamy Govindan[7], Nashat Y. Gabrail[8], Alexander I. Spira[9], Nagashree Seetharamu[10], Yanyan Lou[11], Aaron Scott Mansfield[12], Rachel E. Sanborn[13], Jonathan W. Goldman[14], and Maurice Zauderer[2]



Trial Design



Trial Design

Cohort	Treatment	Patients
A	VX15/2503 (15mg/kg) Nivolumab 360mg	8
B	VX15/2503 (15mg/kg) Ipilimumab (3mg/kg)	8
C	VX15/2503 (15mg/kg) Nivolumab 360mg Ipilimumab (3mg/kg)	8
D	Nivolumab 360mg	8
E	No treatment	6

- **Primary Objective**:
  - Effect of pepinemab on T cell infiltrate into the tumor microenvironment in lymph nodes and blood
- **Secondary Objectives**:
  - Assess safety and tolerability of the combination of pepinemab with checkpoint inhibitors in patients with resectable stage III melanoma
  - Document pathologic response rates of the combination of pepinemab with checkpoint inhibitors

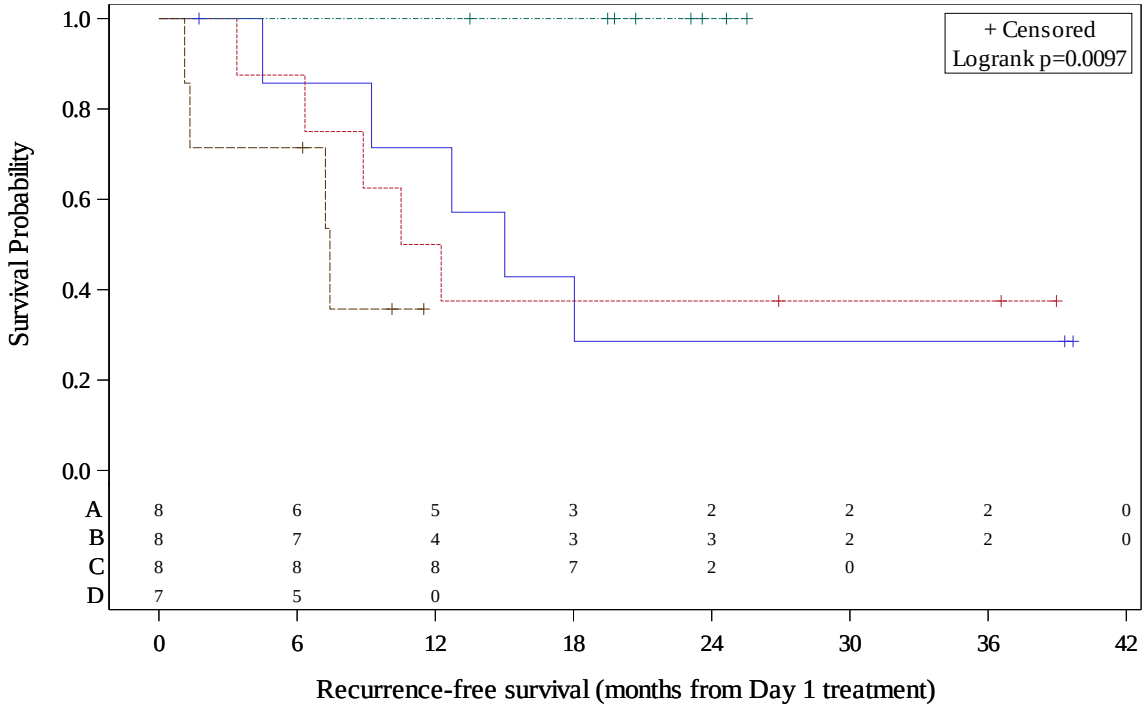
Pathologic Responses

Cohort	Drug	N	pCR*	pMR^
A	Nivolumab/pepinemab	8	25.0%	37.5%
B	Ipilimumab/pepinemab	8	12.5%	12.5%
C	Nivolumab/ipilimumab/pepinemab	8	62.5%	75.0%
D	Nivolumab	7	28.5%	42.9%

***Pathologic complete response**: No viable tumor

^ **Major pathologic response:** pCR plus near pCR (<10% viable tumor)

Recurrence-free Survival



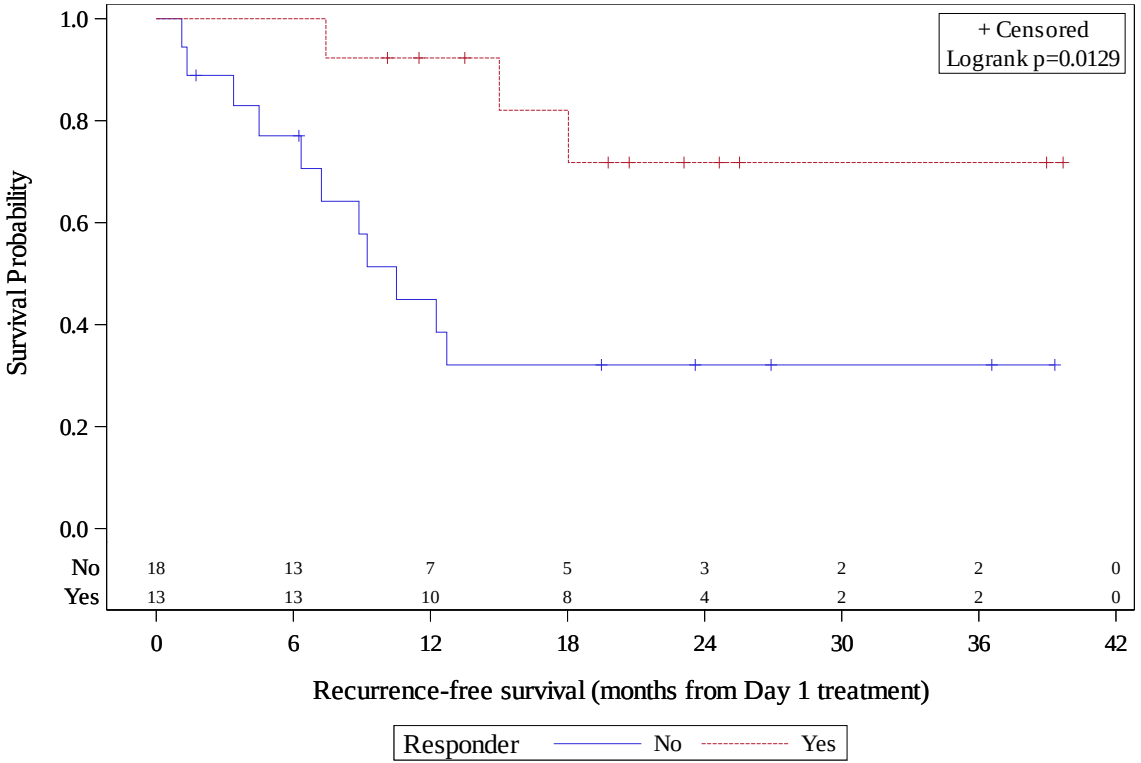
Nivolumab/pepinemab

Ipilimumab/pepinemab

Nivolumab/ipilimumab/ pepinemab

Nivolumab

Recurrence-free Survival by Response



Toxicity

- All patients safely underwent surgery without delay
- Grade 3 adverse events:
  - Nivolumab/pepinemab: 1/8 (arthralgias)
  - Ipilimumab/pepinemab: 3/8 (AI, thrombocytopenia, transaminitis)
  - Nivolumab/ipilimumab/pepinemab: 5/8 (dermatitis, colitis, enteritis, nephritis, AI)
  - Nivolumab: 1/8 (AI)
- Three patients did not receive adjuvant therapy due to AEs

Conclusions

- Pepinemab is well-tolerated and adds no additional toxicity to PD-1 and CTLA-4 inhibitors in the neoadjuvant setting
- The triple combination of nivolumab, ipilimumab and pepinemab shows excellent response rates and with short follow up prolonged RFS compared to doublet therapies
  - Further studies needed to assess durability of response, but this combination could serve as a viable regimen in larger studies
- Correlative biomarker data will be presented at 2022 SITC

Thank you to the Congress organizers and the Discussant

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