

EPICS Congress Coverage: ASCO GU 2020 Highlights

Agenda

Time	Topic	Speaker/Moderator
(5 min)	Welcome and Introductions	Daniel Petrylak, MD
(10 min)	<p>Novel Therapies for Non-Muscle Invasive Bladder Cancer (NMIBC) and Muscle-Invasive Bladder Cancer (MIBC)</p> <ul style="list-style-type: none"> • 4541: Phase II trial of atezolizumab in BCG-unresponsive non-muscle invasive bladder cancer: SWOG S1605 (NCT #02844816). Black et al. • 4503. Phase 2 trial of gemcitabine, cisplatin, plus nivolumab with selective bladder sparing in patients with muscle- invasive bladder cancer (MIBC): HCRN GU 16-257. Galsky et al. • 4504. Pembrolizumab (pembro) in combination with gemcitabine (Gem) and concurrent hypofractionated radiation therapy (RT) as bladder sparing treatment for muscle-invasive urothelial cancer of the bladder (MIBC): A multicenter phase 2 trial. Balar et al. • 4505. Phase II trial of durvalumab plus tremelimumab with concurrent radiotherapy (RT) in patients (pts) with localized muscle invasive bladder cancer (MIBC) treated with a selective bladder preservation approach: IMMUNOPRESERVE-SOGUG trial. Garcia del Muro et al. • 4517. Neoadjuvant atezolizumab (A) with gemcitabine and cisplatin (GC) in patients (pts) with muscle-invasive bladder cancer (MIBC): A multicenter, single-arm, phase 2 trial. Funt et al. • 4518: PrE0807: A phase Ib feasibility trial of neoadjuvant nivolumab (N) without or with lirilumab (L) in cisplatin-ineligible patients (pts) with muscle-invasive bladder cancer (MIBC). Grivas et al. 	Robert Dreicer
(10 min)	<p>Discussion: Novel Therapies for Muscle-Invasive Bladder Cancer</p> <p><i>Key Questions and Topics for Discussion</i></p> <ul style="list-style-type: none"> • What are the potential roles of checkpoint inhibitors, and other investigational agents (IL15, EpCAM) in NMIBC? 	All

	<ul style="list-style-type: none"> • If all were approved by FDA, how would you choose between various options for patients? <ul style="list-style-type: none"> - What's your opinion on managing NMIBC patients by urologists (Vicinium) vs oncologists (immunotherapy)? • What are your thoughts on the phase 1 and 2 results from trials evaluating immune checkpoint inhibitor combinations for MIBC? <ul style="list-style-type: none"> - Do these results support a potential role for immune checkpoint inhibitors in this setting? - Are results consistent across trials, or are there clinically meaningful differences based on agent or approach? - Are there any safety concerns? - What questions still need to be addressed? 	
(5 min)	Summary and Key Takeaways – Bladder Part 1	
(5 min)	Novel Therapies for Metastatic Bladder Cancers <ul style="list-style-type: none"> • 4507. A randomized phase II study comparing cisplatin and gemcitabine with or without berzosertib in patients with advanced urothelial carcinoma. Pal et al. • 4508. First-line pembrolizumab (pembro) in cisplatin-ineligible patients with advanced urothelial cancer (UC): Response and survival results up to five years from the KEYNOTE-052 phase 2 study. O'Donnell et al. • 4519. Inducible T-cell co-stimulatory (ICOS) receptor agonist, feladilimab (fela), alone and in combination (combo) with pembrolizumab (P): Results from INDUCE-1 urothelial carcinoma (UC) expansion cohorts (ECs). Balar et al. • 4534. RC48-ADC combined with toripalimab, an anti-PD-1 monoclonal antibody (Ab), in patients with locally advanced or metastatic urothelial carcinoma (UC): Preliminary results of a phase Ib/II study. Zhou et al. 	Joaquim Bellmunt
(15 min)	Discussion: Novel Therapies for Metastatic Bladder Cancers <i>Key Questions and Topics for Discussion</i> <ul style="list-style-type: none"> • What is your impression of the ATR inhibitor berzosertib? Is there a clinically meaningful improvement in efficacy when added to a 	All

	<p>platinum backbone? Are there any safety concerns? Are there any clinically useful biomarkers to help identify patients who may benefit? Should this agent be developed further in mUC?</p> <ul style="list-style-type: none"> • Do the 5-year results from KEYNOTE-052 provide any additional insights about first-line pembrolizumab in cisplatin-ineligible patients with mUC? • What are your thoughts on the ICOS agonist feladilimab? Does it appear to enhance the activity of pembrolizumab? Is the single agent activity meaningful? Are there any safety concerns? Are there any clinically useful biomarkers to help identify patients who may benefit? Should this agent be developed further in mUC? • What is your impression of the preliminary results of the ADC/PD-1 combination therapy? 	
(5 min)	Summary and Key Takeaways – Bladder Part 2	
(10 min)	<p>Metastatic Castration-Resistant Prostate Cancer</p> <ul style="list-style-type: none"> • LBA4. Phase III study of lutetium-177-PSMA-617 in patients with metastatic castration-resistant prostate cancer (VISION). Morris et al. • 5013. Results of an ongoing phase 1/2a dose escalation study of HPN424, a tri-specific half-life extended PSMA-targeting T-cell engager, in patients with metastatic castration-resistant prostate cancer (mCRPC). De Bono et al. • 5015. Phase I study of 225Ac-J591 for men with metastatic castration-resistant prostate cancer (mCRPC). Tagawa et al.5014 • 5002. Decreased fracture rate by mandating bone protecting agents in the EORTC 1333/PEACEIII trial combining Ra223 with enzalutamide versus enzalutamide alone: An updated safety analysis. Gillessen et al. • COMBAT-CRPC: Concurrent adMinistration of Bipolar Androgen Therapy (BAT) and nivolumab in men with metastatic castration-resistant prostate cancer (mCRPC). Markowski et al. • 5031: First-in-human study of TAS3681, an oral androgen receptor (AR) antagonist with AR and AR splice variant (AR-SV) 	Scott Tagawa

	<p>downregulation activity, in patients (pts) with metastatic castration-resistant prostate cancer (mCRPC) refractory to abiraterone (ABI) and/or enzalutamide (ENZ) and chemotherapy (CT). De Bono et al.</p> <ul style="list-style-type: none"> • 5039: ARC-6: A phase 1b/2, open-label, randomized platform study to evaluate efficacy and safety of etrumadenant (AB928)-based treatment combinations in patients with metastatic castrate-resistant prostate cancer (mCRPC). Subudhi et al. • 5056: VERU-111, an oral cytoskeleton disruptor, to treat men with metastatic castration-resistant prostate cancer (mCRPC) who failed an androgen receptor targeting agent. Markowski et al. 	
(15 min)	<p>Discussion: Metastatic Castration-Resistant Prostate Cancer <i>Key Questions and Topics for Discussion</i></p> <ul style="list-style-type: none"> • What are your thoughts on the VISION trial and lutetium-177-PSMA-617 in mCRPC? <ul style="list-style-type: none"> – If approved, where will this agent fit in your algorithm for mCRPC? In which patients would you use this agent? – Is PSMA selection necessary? • What is your impression of the two PSMA-targeted agents in earlier-phase development (HPN424 and 225Ac-J591)? Do the efficacy signals justify further development? Are there any safety concerns? <ul style="list-style-type: none"> – Should these agents be further developed for mCRPC, and if so, what next steps would you suggest? • Do the updated safety results from the EORTC 1333/PEACEIII trial provide any new insights into how to best use radium-223? Are bone protecting agents necessary when using this agent? • What is your impression of concurrent BAT with nivolumab? Does this approach appear to provide any additional benefit over the activity expected with either approach alone? • What are your thoughts on the early-phase results with the novel agents TAS3681, etrumadenant, and VERU-111? <ul style="list-style-type: none"> – What are the most promising new agents for CRPC in your opinion? 	All

(5 min)	Summary and Key Takeaways – Prostate Part 1	
(10 min)	Break	
(10 min)	<p>Localized and Metastatic Castration-Sensitive Prostate Cancer</p> <ul style="list-style-type: none"> • 5000. A phase 3 trial with a 2x2 factorial design of abiraterone acetate plus prednisone and/or local radiotherapy in men with de novo metastatic castration-sensitive prostate cancer (mCSPC): First results of PEACE-1. Fizazi et al. • 5001. SWOG S1216: A phase III randomized trial comparing androgen deprivation therapy (ADT) plus TAK-700 with ADT plus bicalutamide in patients (pts) with newly diagnosed metastatic hormone-sensitive prostate cancer (mHSPC) (NCT01809691). Agarwal et al. • 5011. Radiation and androgen deprivation therapy with or without docetaxel in the management of non-metastatic unfavorable-risk prostate cancer: A prospective randomized trial. D'Amico et al. • 5012. Interim results of aasur: A single arm, multi-center phase 2 trial of apalutamide (A) + abiraterone acetate + prednisone (AA+P) + leuprolide with stereotactic ultra-hypofractionated radiation (UHRT) in very high risk (VHR), node negative (N0) prostate cancer (PCa). McBride et al. 	Karim Fizazzi
(15 min)	<p>Discussion: Localized and Metastatic Castration-Sensitive Prostate Cancer</p> <p><i>Key Questions and Topics for Discussion</i></p> <ul style="list-style-type: none"> • What are your thoughts on the results of the PEACE-1 trial? How do the three approaches compare? Does the efficacy and safety profile support the use of abiraterone plus radiation therapy for de novo metastatic CSPC? • How does TAK-700 compare with bicalutamide in terms of efficacy and safety? Do you see a potential role for TAK-700 in mCSPC? • Does the addition of docetaxel provide a clinically meaningful advantage over radiation and ADT for non-metastatic high-risk PC? Is the safety profile of this regimen feasible in this group of men? • What is your impression of the results from the aasur study? Is this approach feasible in 	All

	very high risk localized PC? Is the safety profile acceptable?	
(5 min)	Summary and Key Takeaways – Prostate Part 2	
(10 min)	<p>Advanced Renal Cell Carcinoma</p> <ul style="list-style-type: none"> • LBA5. Pembrolizumab versus placebo as post-nephrectomy adjuvant therapy for patients with renal cell carcinoma: Randomized, double-blind, phase III KEYNOTE-564 study. Choueiri et al. • 4500. Pembrolizumab (pembro) plus axitinib (axi) versus sunitinib as first-line therapy for advanced clear cell renal cell carcinoma (ccRCC): Results from 42-month follow-up of KEYNOTE-426. Rini et al. • 4501. CANTATA: Primary analysis of a global, randomized, placebo (Pbo)-controlled, double-blind trial of telaglenastat (CB-839) + cabozantinib versus Pbo + cabozantinib in advanced/metastatic renal cell carcinoma (mRCC) patients (pts) who progressed on immune checkpoint inhibitor (ICI) or anti-angiogenic therapies. Tannir et al. • 4502. Health-related quality-of-life (HRQoL) analysis from the phase 3 CLEAR trial of lenvatinib (LEN) plus pembrolizumab (PEMBRO) or everolimus (EVE) versus sunitinib (SUN) for patients (pts) with advanced renal cell carcinoma (aRCC). Motzer et al. • 4515. Safety and efficacy outcomes with nivolumab plus ipilimumab in patients with advanced renal cell carcinoma and brain metastases: results from the CheckMate 920 trial. Enamekhoo et al. • 4516. Survival benefit of nephrectomy prior to immunotherapy-based combinations in patients with metastatic renal cell carcinoma: An FDA pooled analysis. Fallah et al. • 4556: Randomized phase Ib study to evaluate safety, pharmacokinetics and therapeutic activity of simlukafusp α in combination with atezolizumab \pm bevacizumab in patients with unresectable advanced/ metastatic renal cell carcinoma (RCC) (NCT03063762). Perez-Gracia et al. 	Thomas Powles
(15 min)	<p>Discussion: Advanced Renal Cell Carcinoma <i>Key Questions and Topics for Discussion</i></p>	All

	<ul style="list-style-type: none"> • What is your impression of the KEYNOTE-564 results? Is the DFS improvement clinically meaningful? Do these results support the use of pembrolizumab in the adjuvant setting for RCC? If so, in which patients would you consider this approach? • Do the 42-month follow-up results from the KEYNOTE-426 trial provide any new insights into the combination of pembrolizumab plus axitinib? How does this combination compare with the other available first-line regimens for mRCC? • What can we learn from the CANTATA results regarding the combination of telaglenastat plus cabozantinib for the development of other new strategies for previously treated mRCC? • What insights can we gain from the HRQoL results of the CLEAR trial? How does QoL with either lenvatinib combination compare with other first-line regimens? Is this consistent with your clinical experience? Does it impact your selection of first-line therapy? • What is your perception of ipi/nivo activity in patients with brain metastases? Would you consider this combination in this patient subgroup based on these results? • Based on the FDA analysis, does nephrectomy provide any benefit prior to immune checkpoint inhibitor therapy? Would you recommend this approach? If so, in which patients? • Do you have a preference for 1L IO/TKI combo? Why? • What role do you think the cytokines (IL2) will play in RCC? 	
(5 min)	Summary and Key Takeaways – RCC Part 1	
(5 min)	<p>Renal Cell Carcinoma – Subgroup-Specific Therapies</p> <ul style="list-style-type: none"> • 4509. Nivolumab plus cabozantinib in patients with non-clear cell renal cell carcinoma: Results of a phase 2 trial. Lee et al. • 4510. Phase II study of nivolumab and salvage nivolumab + ipilimumab in treatment-naïve patients (pts) with advanced non-clear cell renal cell carcinoma (nccRCC) (HCRN GU16-260-Cohort B). Atkins et al. 	Thomas Powles

	<ul style="list-style-type: none"> 4511. Clinical activity of durvalumab and savolitinib in MET-driven, metastatic papillary renal cancer. Rodriguez et al. 	
(10 min)	<p>Discussion: Renal Cell Carcinoma – Subgroup-Specific Therapies</p> <p><i>Key Questions and Topics for Discussion</i></p> <ul style="list-style-type: none"> Does the combination of nivolumab plus cabozantinib appear to have greater activity than would be expected with either agent alone in non-clear-cell RCC? How does it compare with other options for this patient subset? What is your impression of the strategy of using nivolumab followed by salvage ipi/nivo for patients with non-clear-cell RCC? What are the advantages and/or disadvantages of this approach? What are your thoughts on the combination of durvalumab plus savolitinib for MET-driven papillary mRCC? Does this regimen warrant further development? 	
(5 min)	Summary and Key Takeaways – RCC Part 2	
(5 min)	Summary and Closing Remarks	Daniel Petrylak, MD