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Conference Coverage: ASCO 2024 – Focus on Squamous Cell Carcinoma of the Head and Neck (SCCHN)

July 25, 2024

Full Report

Report Contents

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Content	Slide
Meeting Snapshot	3
Faculty Panel	4
Meeting Agenda	5
Key Insights and Strategic Recommendations	6
Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches	9
Metastatic SCCHN – Focus on Chemotherapy and Targeted Therapy	21
Metastatic SCCHN – Focus on Immune Therapy	30
SCCHN – Learnings From Real-World Data	38

Meeting Snapshot

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VIRTUAL CLOSED-DOOR ROUNDTABLE

DATE:
July 25, 2024

DISEASE STATE AND DATA PRESENTATIONS by key experts

INSIGHTS REPORT including postmeeting analyses and actionable recommendations

PANEL: Key experts in SCCHN
- > 3 US
- > 2 Global

SCCHN-SPECIFIC DISCUSSIONS on therapeutic advances and their application in clinical decision-making

Panel Consisting of 3 US and 2 Global SCCHN Experts

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Robert Haddad, MD
Dana-Farber Cancer Institute

Robert L. Ferris, MD, PhD
UPMC Hillman Cancer Center

Tanguy Seiwert, MD
Johns Hopkins School of Medicine

Paolo Bossi, MD
Humanitas Cancer Center

CHAIR:
Amanda Psyrri, MD, PhD
Attikon University Hospital, National Kapodistrian University of Athens

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Meeting Agenda

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Time (EST/EEST)	Topic	Speaker/Moderator
9.00 AM – 9.05 AM/ 16.00 – 16.05	**Welcome and Introductions**	Amanda Psyrri, MD, PhD
9.05 AM – 9.20 AM/ 16.05 – 16.20	**Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches**	Robert Haddad, MD
9.20 AM – 9.50 AM/ 16.20 – 16.50	Discussion and Key Takeaways	All Robert Haddad, MD
9.50 AM – 10.05 AM/ 16.50 – 17.05	**Metastatic SCCHN – Focus on Chemotherapy and Targeted Therapy**	Tanguy Seiwert, MD
10.05 AM – 10.35 AM/ 17.05 – 17.35	Discussion and Key Takeaways	All Tanguy Seiwert, MD
10.35 AM – 10.50 AM/ 17.35 – 17.50	**Metastatic SCCHN – Focus on Immune Therapy**	Robert L. Ferris, MD, PhD
10.50 AM – 11.20 AM/ 17.50 – 18.20	Discussion and Key Takeaways	All Robert L. Ferris, MD, PhD
11.20 AM – 11.30 AM/ 18.20 – 18.30	**SCCHN – Learnings From Real-World Data**	Paolo Bossi, MD
11.30 AM – 11.55 AM/ 18.30 – 18.55	Discussion and Key Takeaways	All Paolo Bossi, MD
11.55 AM – 12.00 PM/ 18.55 – 19.00	**Closing Remarks**	Amanda Psyrri, MD, PhD

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Conference Highlights

Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches

Phase III trial of nimotuzumab plus chemoradiation

Patil VM, et al. ASCO 2024. Abstract LBA6092

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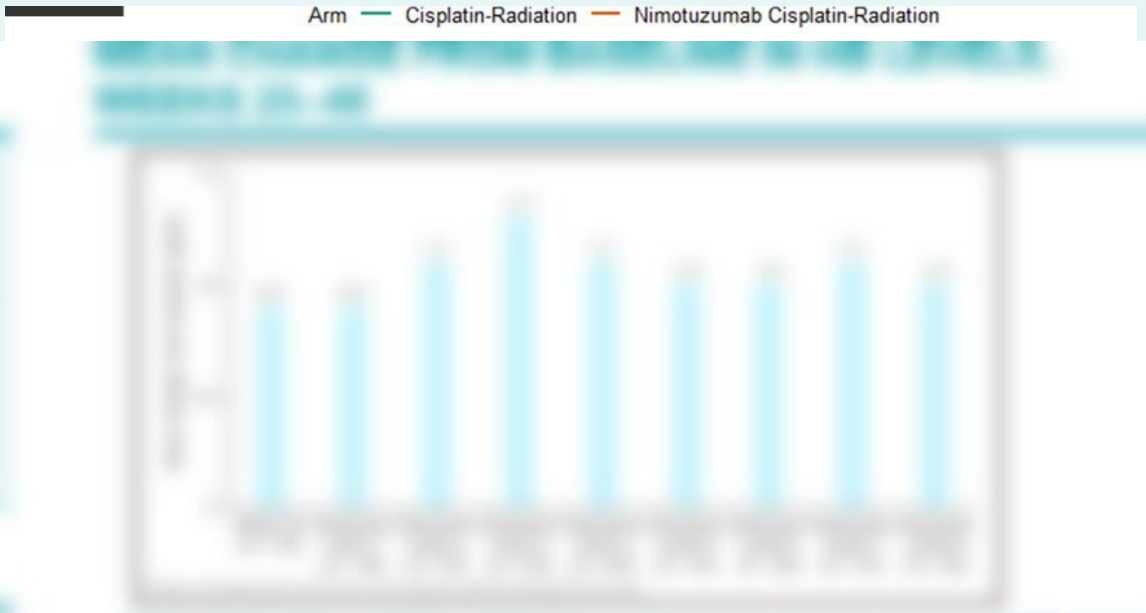
Background

> This trial examined the efficacy and late-term toxicities of the

OS results



Phase II trial of cadonilimab

Cao F, et al. ASCO 2024. Abstract 6044

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Background

> This trial examined the efficacy and safety of cadonilimab, a PD-

Response rates

Phase III trial of intensity-modulated proton therapy (IMPT)

Frank SJ, et al. ASCO 2024. Abstract 6006

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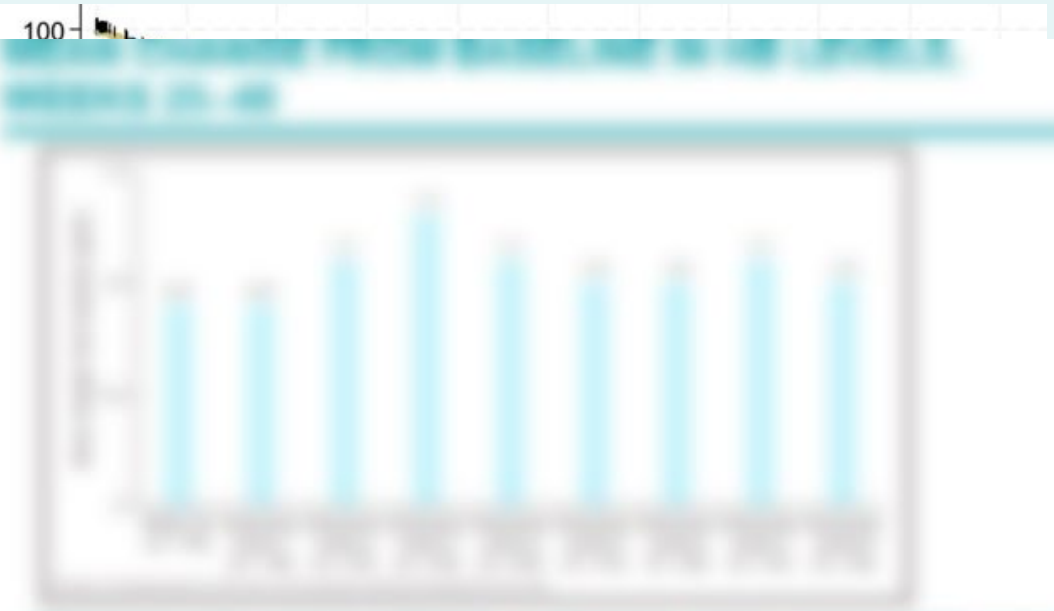
Background

> Randomized noninferiority trial compared outcomes between IMRT

PFS



Phase II trial of hypoxia-directed therapy de-escalation

Lee NY, et al. ASCO 2024. Abstract 6007

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Background

> This multicenter trial examined the efficacy of hypoxia-directed de-

PFS

Phase III trial of leukocyte interleukin injection

Eyal T, et al. 2024 IDDST 20th Annual Congress

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Background

> This randomized trial examined the efficacy and safety of

OS

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Key Insights

Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches

Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches (1/5)

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Experts do not believe the anti-EGFR antibody nimotuzumab will obtain

Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches (2/5)

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Experts are highly interested in strategies to reduce treatment toxicity

ongoing trials will help clarify the optimal sequencing of agents

- Experts are still using a CLI/CPF/5-fluorouracil-like regimen (± bevacizumab and pembrolizumab) first-line, followed by T-DXd second-line, for most patients
- Most experts are using trastuzumab deruxtecan third-line, but will prioritize the tucatinib triplet for patients with evidence of brain metastases
- The tucatinib triplet may also be used in the second-line setting, before T-DXd, for patients with documented brain metastases
  - If tucatinib is used second-line, experts are divided on whether they would currently use T-DXd or trastuzumab deruxtecan third-line
    - Results of the ongoing DESTINY-Breast03 trial comparing trastuzumab deruxtecan vs T-DXd will help to clarify the optimal sequence of these ADCs
- Trastuzumab deruxtecan and the tucatinib triplet may also be used earlier than third-line in patients who recur following treatment with trastuzumab, pertuzumab, and T-DXd in the (neo)adjuvant setting, but this represents a small fraction of patients
- Patient preferences can also factor into the sequencing of these new agents (eg, 3 drugs vs 1 drug, concern about hair loss vs diarrhea)
- The impressive efficacy of trastuzumab deruxtecan and the tucatinib regimen have pushed other options, such as trastuzumab chemotherapy combinations, neratinib, and margetuximab, to later lines of therapy

Dr Pegram

We used to run out of good options and we would just regress to the mean of chemotherapy plus trastuzumab in the salvage setting, but now we have so many great choices that that really takes a backseat. It's really been exciting to have multiple options for patients after T-DXd — again, practice changing, unprecedented

Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches (3/5)

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Experts are intrigued by the activity of cadonilimab, a PD-1/CTLA-4 bispecific,

Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches (4/5)

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Experts think the data for Multikine are interesting, but found it difficult to

Early and Locally Advanced SCCHN – Current Treatment Strategies and Novel Therapeutic Approaches (5/5)

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While the data showing noninferiority of IMPT to IMRT are engaging, the

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Conference Highlights

Metastatic SCCHN – Focus on Chemotherapy and Targeted Therapy

Phase II innovaTV 207 trial Part C

Sun L, et al. ASCO 2024. Abstract 6012

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Background

Phase II trial of petosemtamab plus pembrolizumab

Fayette J, et al. ASCO 2024. Abstract 6014

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Background

ORR

Phase II DESTINY-PanTumor02 trial

Meric-Bernstam F, et al. ASCO 2024. Abstract 6037

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Background

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Key Insights

Metastatic SCCHN – Focus on Chemotherapy and Targeted Therapy

Metastatic SCCHN – Focus on Chemotherapy and Targeted Therapy (1/4)

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Experts believe it will be a race between ADCs and EGFR-targeting

Metastatic SCCHN – Focus on Chemotherapy and Targeted Therapy (2/4)

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Experts are impressed by the activity of the ADCs TV and T-DXd

Metastatic SCCHN – Focus on Chemotherapy and Targeted Therapy (3/4)

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Experts are excited about the data for petosemtamab plus pembrolizumab for

Metastatic SCCHN – Focus on Chemotherapy and Targeted Therapy (4/4)

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Experts debated the need for biomarker-driven patient selection for

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Metastatic SCCHN – Focus on Immune Therapy

Phase II OpcemISA trial

Even C, et al. ASCO 2024. Abstract 6003

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Background

> This randomized trial investigated the efficacy and safety of

OS results

Phase II PATHWay study

Pearson A, et al. ASCO 2024. Abstract 6008

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Background

- This multisite, randomized, placebo (PL)-controlled trial examined the

OS results

Phase IIb TACTI-003 (KEYNOTE-PNC-34) trial

Post-ASCO data press release from Immutep

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Background

- TACTI-003 is evaluating eftilagimod alpha (efti), a novel LAG3 immunotherapy, in combination with pembrolizumab as first-line

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Key Insights

Metastatic SCCHN – Focus on Immune Therapy

Metastatic SCCHN – Focus on Immune Therapy (1/3)

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Experts believe combining IO with long-peptide vaccines targeting HPV16 E6/E7 is a promising new strategy for CPS-high tumors

Metastatic SCCHN – Focus on Immune Therapy (2/3)

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Experts are not enthusiastic about the future of oncolytic viruses in metastatic SCCHN

Metastatic SCCHN – Focus on Immune Therapy (3/3)

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Experts believe the data for eftilagimod alpha (efti), a novel LAG3 inhibitor, are impactful enough to obtain accelerated FDA approval

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SCCHN – Learnings From Real-World Data

Long-term survival with pembrolizumab vs cetuximab-based therapy

Hamedi Z, et al. ASCO 2024. Abstract 6022

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Background

- This real-world analysis retrospectively compared long

OS results

Low-dose nivolumab plus metronomic chemotherapy

Kate S, et al. ASCO 2024. Abstract 6050

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Background

- This study prospectively evaluated the real-world effectiveness and safety of low-dose nivolumab along with triple metronomic

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Key Insights

SCCHN – Learnings From Real-World Data

SCCHN – Learnings From Real-World Data (1/4)

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Experts stressed the importance of refining real-world data

Experts acknowledged the need for real-world data to optimize patient treatment

SCCHN – Learnings From Real-World Data (2/4)

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Experts believe long-term survival data with ICIs are the most important real-world data currently needed

SCCHN – Learnings From Real-World Data (3/4)

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Experts acknowledged that patient selection needs to be further refined to better identify which patients may be cured by ICIs

SCCHN – Learnings From Real-World Data (4/4)

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Experts are impressed by the real-world efficacy of low-dose nivolumab combined with triple metronomic chemotherapy (TMC)

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