

Herbstmeeting 2020 Österreichischen Gesellschaft für Krankenhauspharmazie

Immunonkologische Highlights des Jahres 2020 - Ausblick auf 2021

17. Oktober 2020

**Mag. Markus Krenn
Disease Area Specialist I-O at BMS**



10/20 1506AT2008847

Was sind Immunonkologische Highlights?

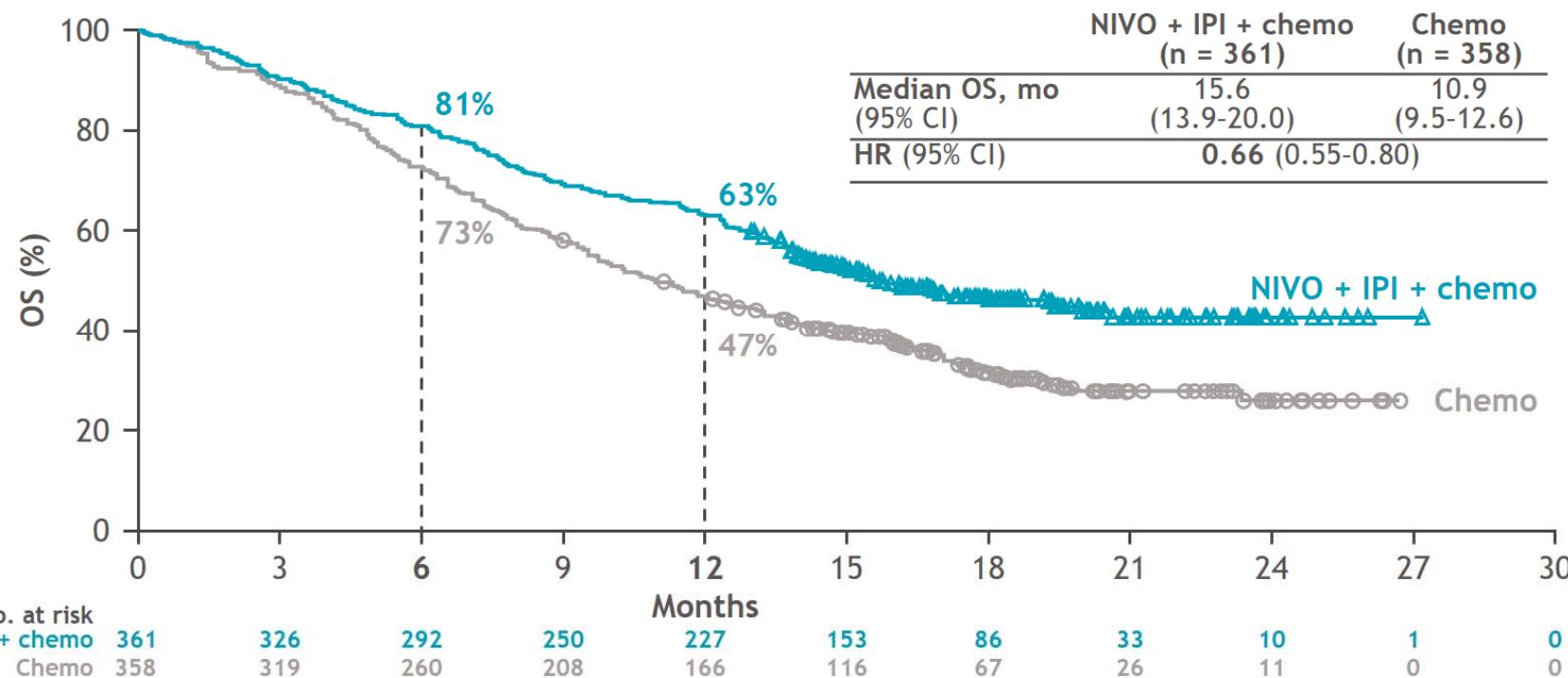
- Checkpoint Inhibitoren
- EMA Zulassungen / pos CHMP opinions
- Positive Ph III Studien
- Rückblick auf 12 Monate -> Ausblick auf 12 Monate
- Chronologische Abfolge entspricht Zeitpunkte der Bekanntgaben

Oktober 2019

- 1L NSCLC, Nivolumab + Ipilimumab + CT vs CT, CheckMate-9LA
- 1L NSCLC, Durvalumab + CT (+ Tremelimumab) vs CT, POSEIDON
- 1L HCC, Atezolizumab + Bevacizumab vs Sorafenib, IMbrave150

1L NSCLC, Nivolumab + Ipilimumab + CT vs CT

Oktober
2019



Minimum follow-up: 12.7 months.

1L NSCLC, Durvalumab + CT (+ Tremelimumab) vs CT

Okttober
2019

Imfinzi and Imfinzi plus tremelimumab delayed disease progression in Phase III POSEIDON trial for 1st-line treatment of Stage IV non-small cell lung cancer

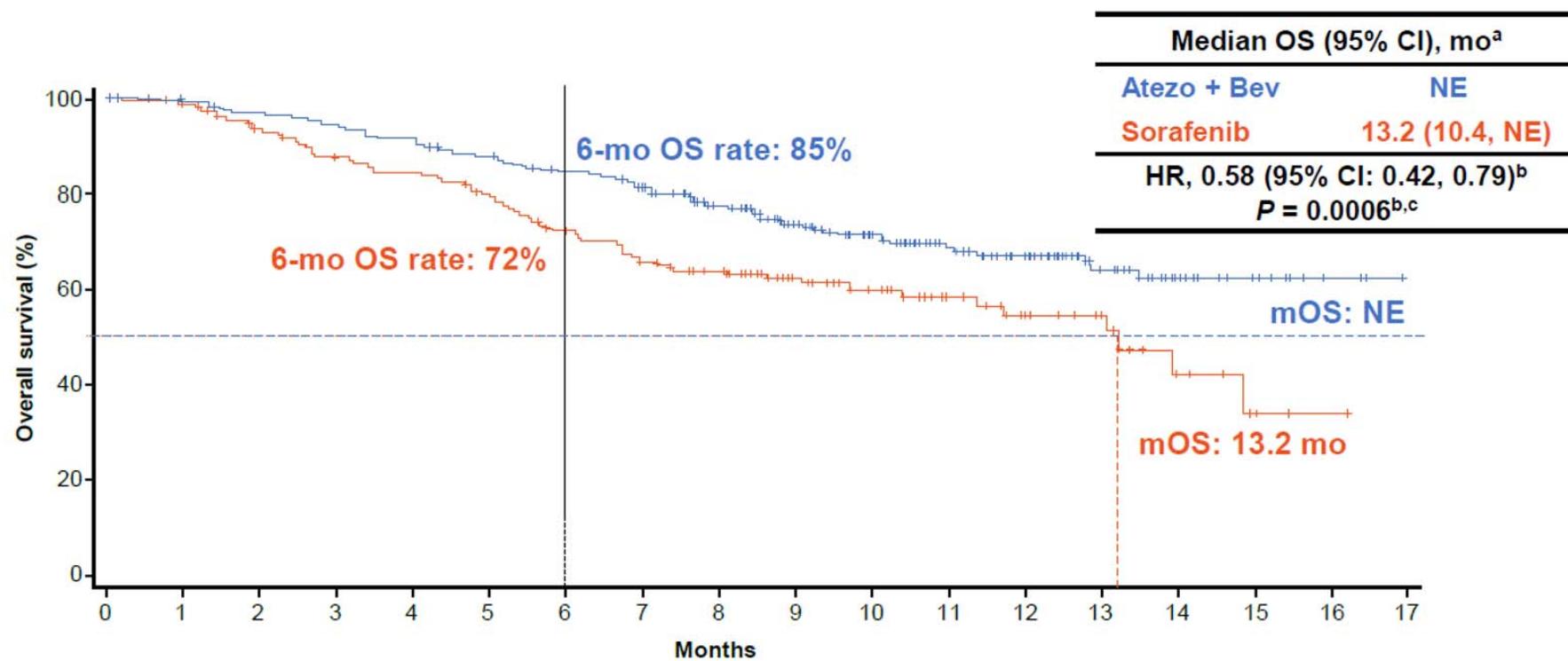
POSEIDON included both non-squamous and squamous patients and a broad choice of standard chemotherapy options

PUBLISHED

28 October 2019

1L HCC, Atezolizumab + Bevacizumab vs Sorafenib

Oktober
2019



No. at risk

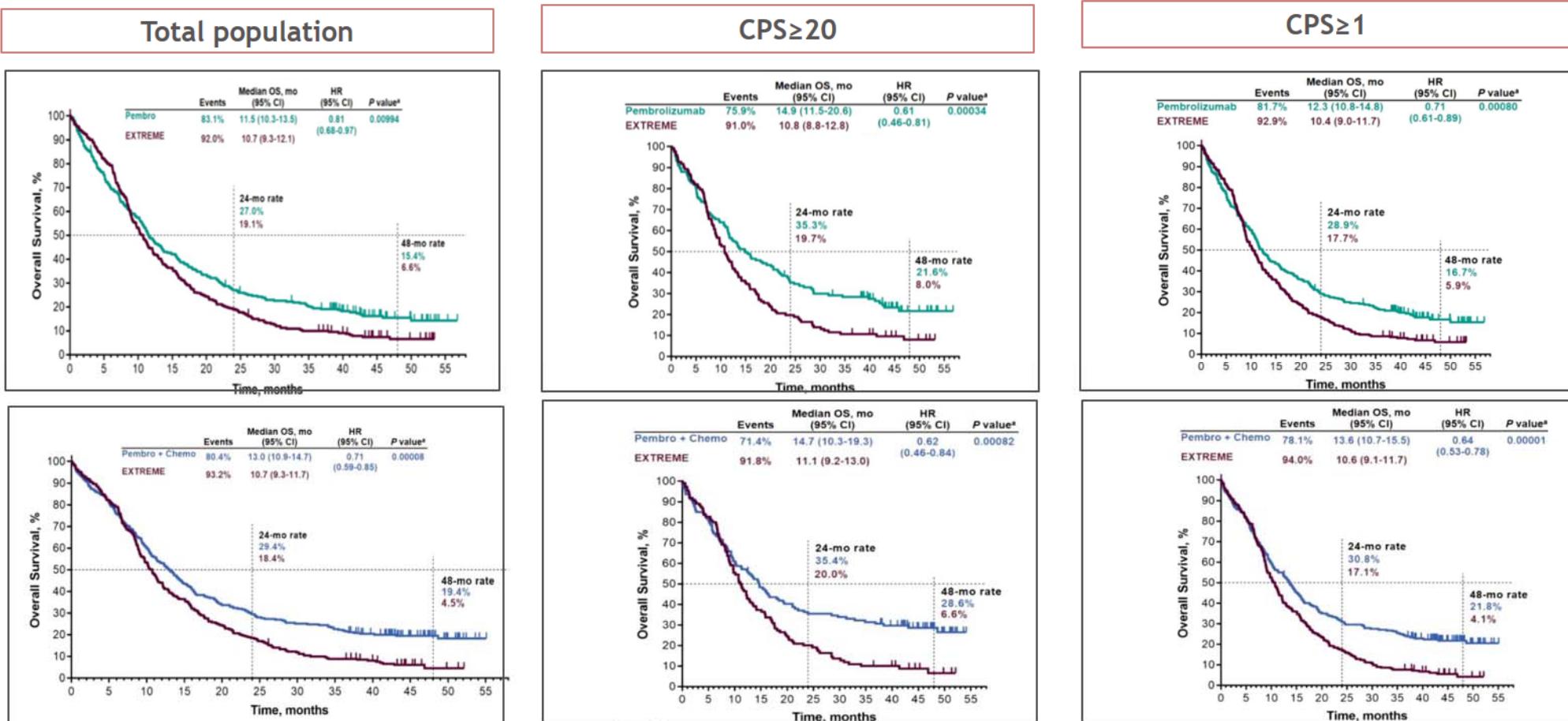
Sorafenib	165	157	143	132	127	118	105	94	86	60	45	33	24	16	7	3	1	NE
Atezo + Bev	336	329	320	312	302	288	275	255	222	165	118	87	64	40	20	11	3	NE

November 2019

- 1L SCCHN, Pembrolizumab +/- CT vs EXTREME, Keynote-048, EMA approval

1L SCCHN, Pembrolizumab +/- CT vs EXTREME

November
2019

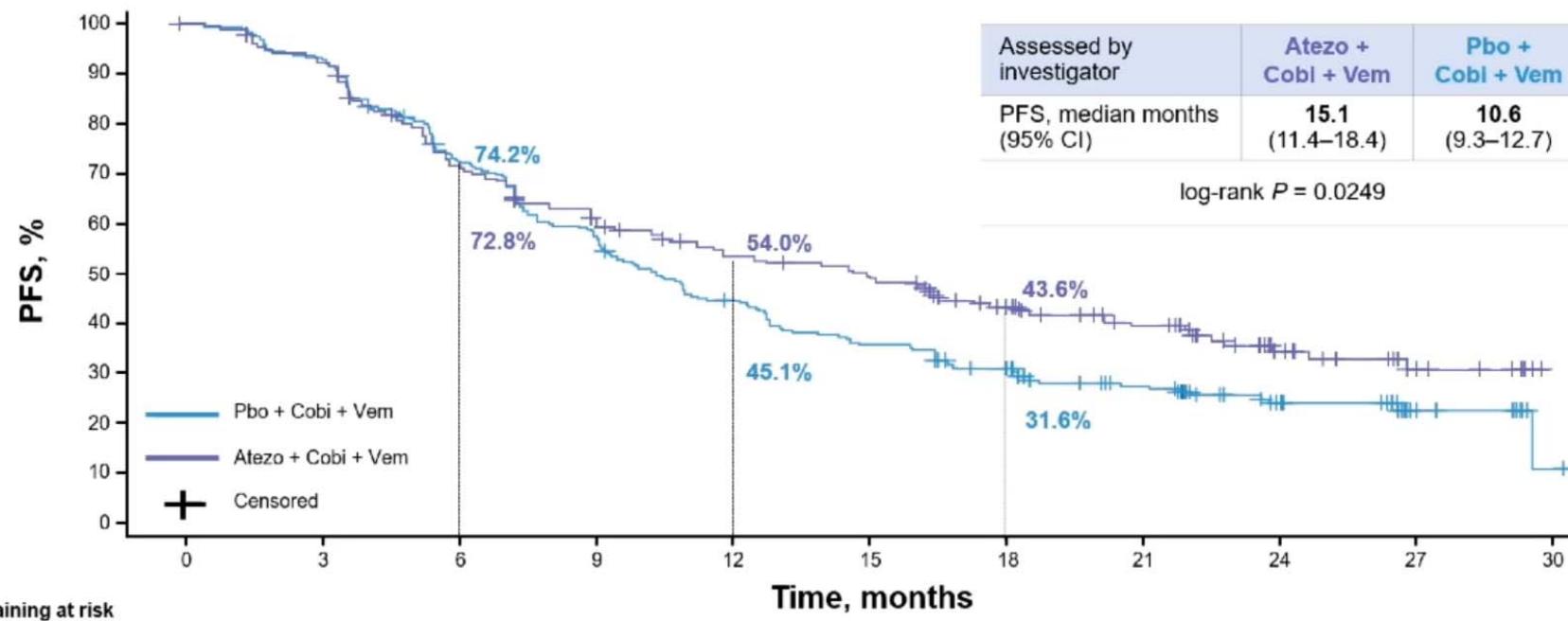


Dezember 2019

- 1L BRAF pos MEL, Atezolizumab + Cobimetinib + Vemurafenib
vs Cobimetinib + Vemurafenib, IMspire150

1L MEL, Atezolizumab + Cobimetinib + Vemurafenib

Dezember
2019



Patients remaining at risk

Pbo + Cobi + Vem	258	230	179	143	107	86	71	51	27	11	1
Atezo + Cobi + Vem	256	229	174	149	123	114	90	66	34	11	

Atezo, atezolizumab; CI, confidence interval; Cobi, cobimetinib; Pbo, placebo; Vem, vemurafenib.

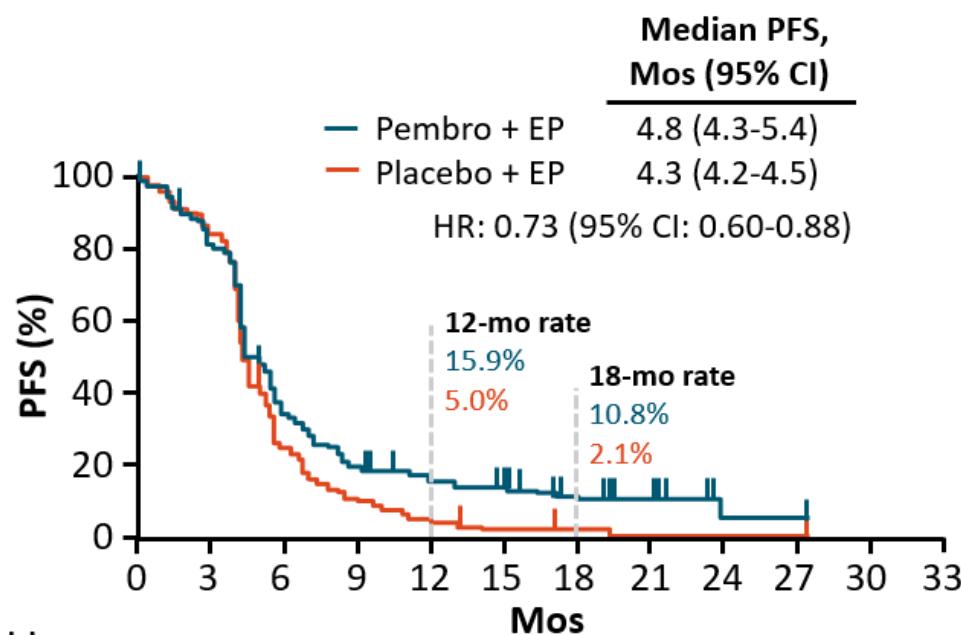
Jänner 2020

- 1L SCLC, Pembrolizumab + CT vs CT, Keynote-604

1L SCLC, Pembrolizumab + CT vs CT

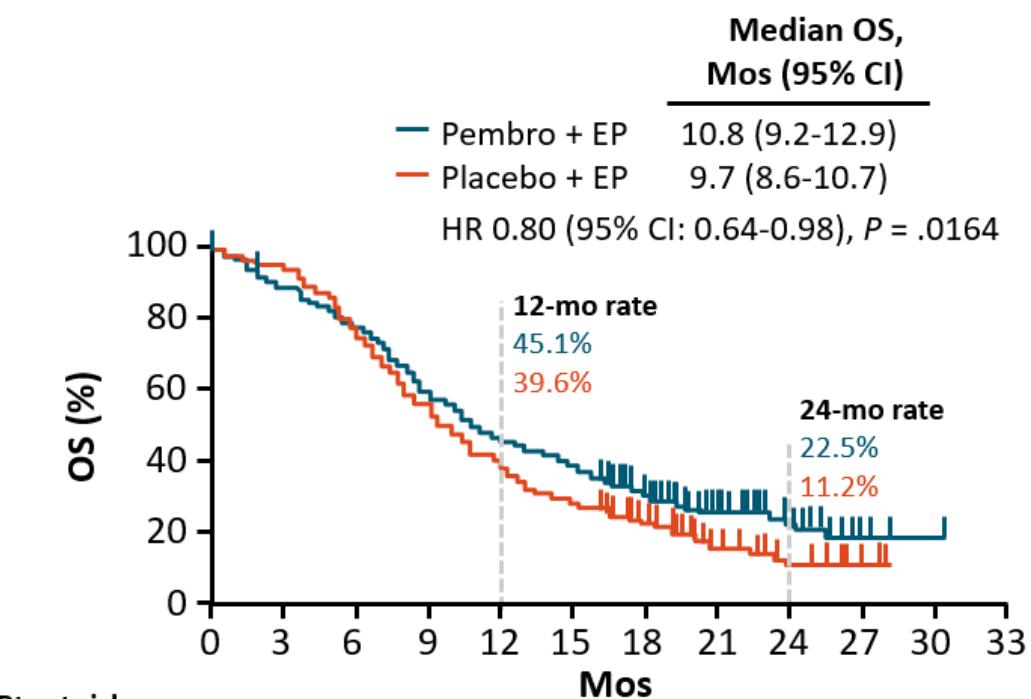
Jänner
2020

Final Analysis



Pts at risk, n											
Pembro + EP	228	182	76	42	32	26	15	10	1	1	0
Placebo + EP	225	189	56	23	11	4	3	1	1	1	0

ITT



Pts at risk, n											
Pembro + EP	223	198	174	132	102	87	60	31	15	3	1
Placebo + EP	223	211	169	122	89	63	44	19	8	3	0

Februar 2020

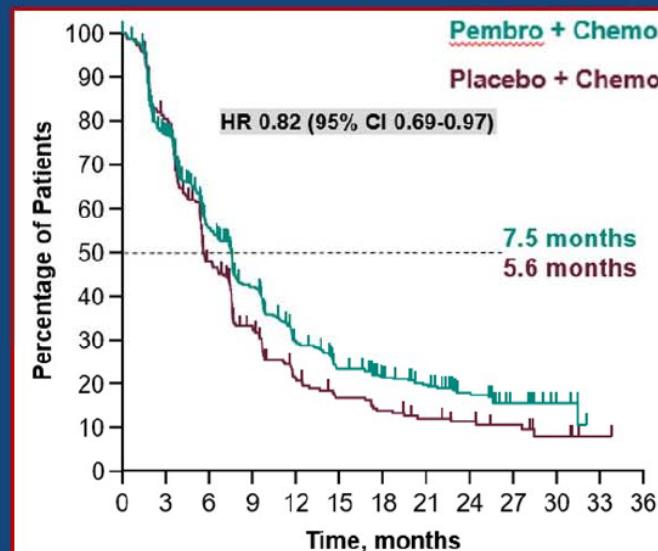
- 1L TNBC, Pembrolizumab + CT vs CT (CPS ≥ 10), Keynote-355

1L TNBC, Pembrolizumab + CT vs CT (CPS \geq 10)

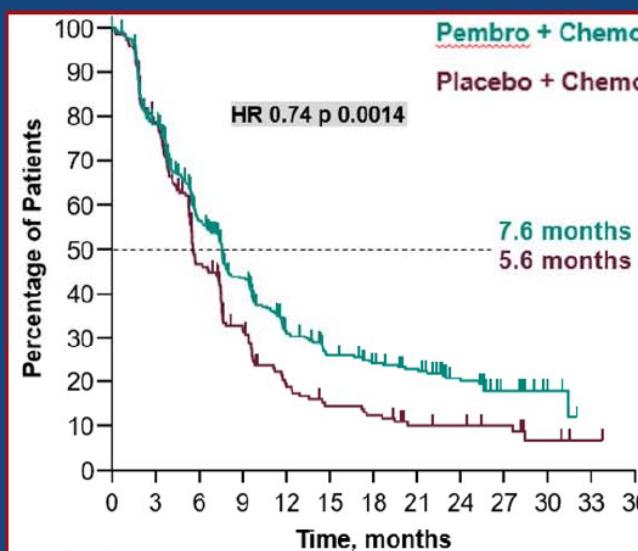
Februar
2020

PFS

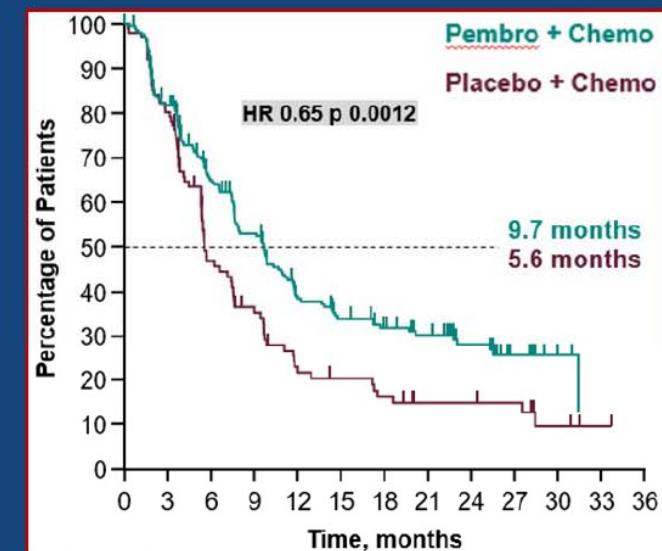
ITT



PD-L1 CPS \geq 1



PD-L1 CPS \geq 10



Statistical significance was not tested due to the prespecified hierarchical testing strategy

Prespecified P value boundary of 0.00111 not met

Prespecified P value boundary of 0.00411 met

75% of pts

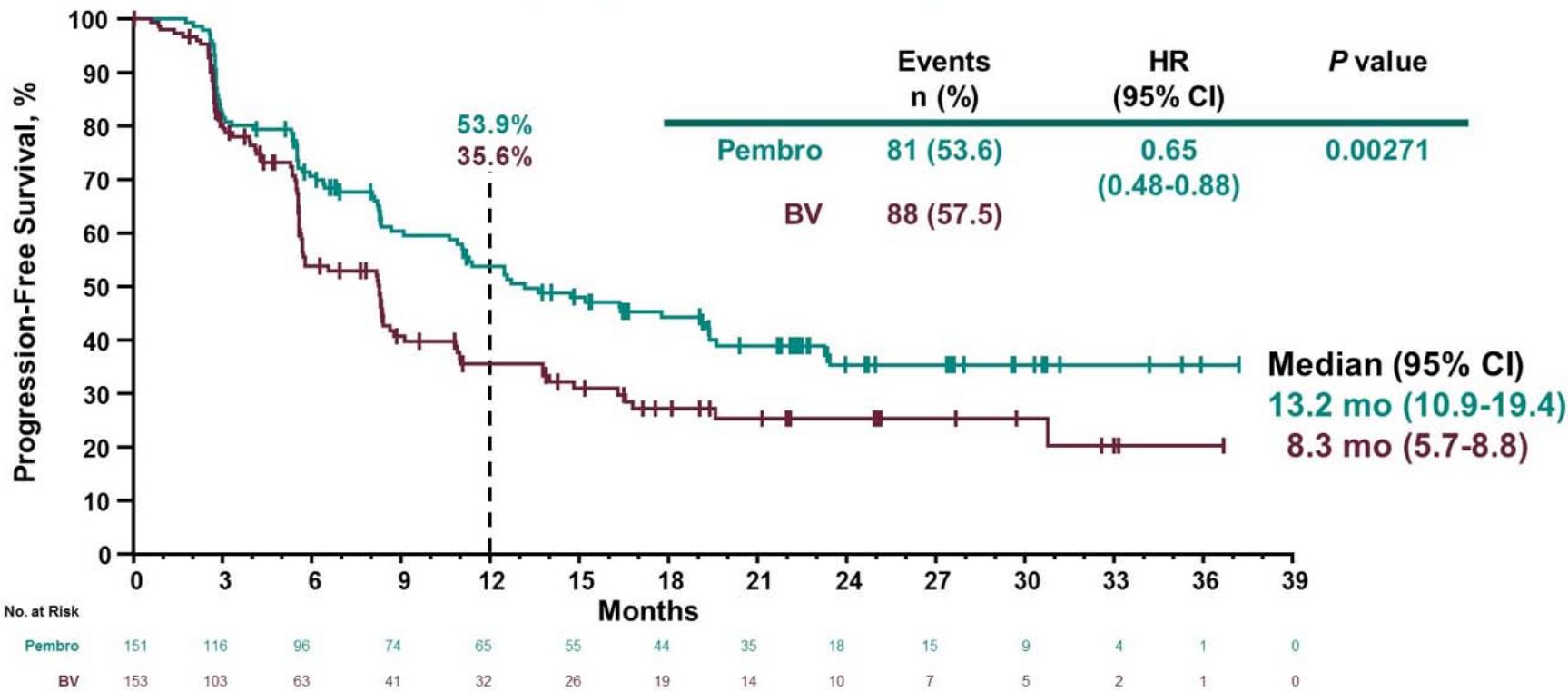
38% of pts

März 2020

- rr cHL, Pembrolizumab vs Brentuximab Vedotin, Keynote-204

rr cHL, Pembrolizumab vs Brentuximab Vedotin

März
2020

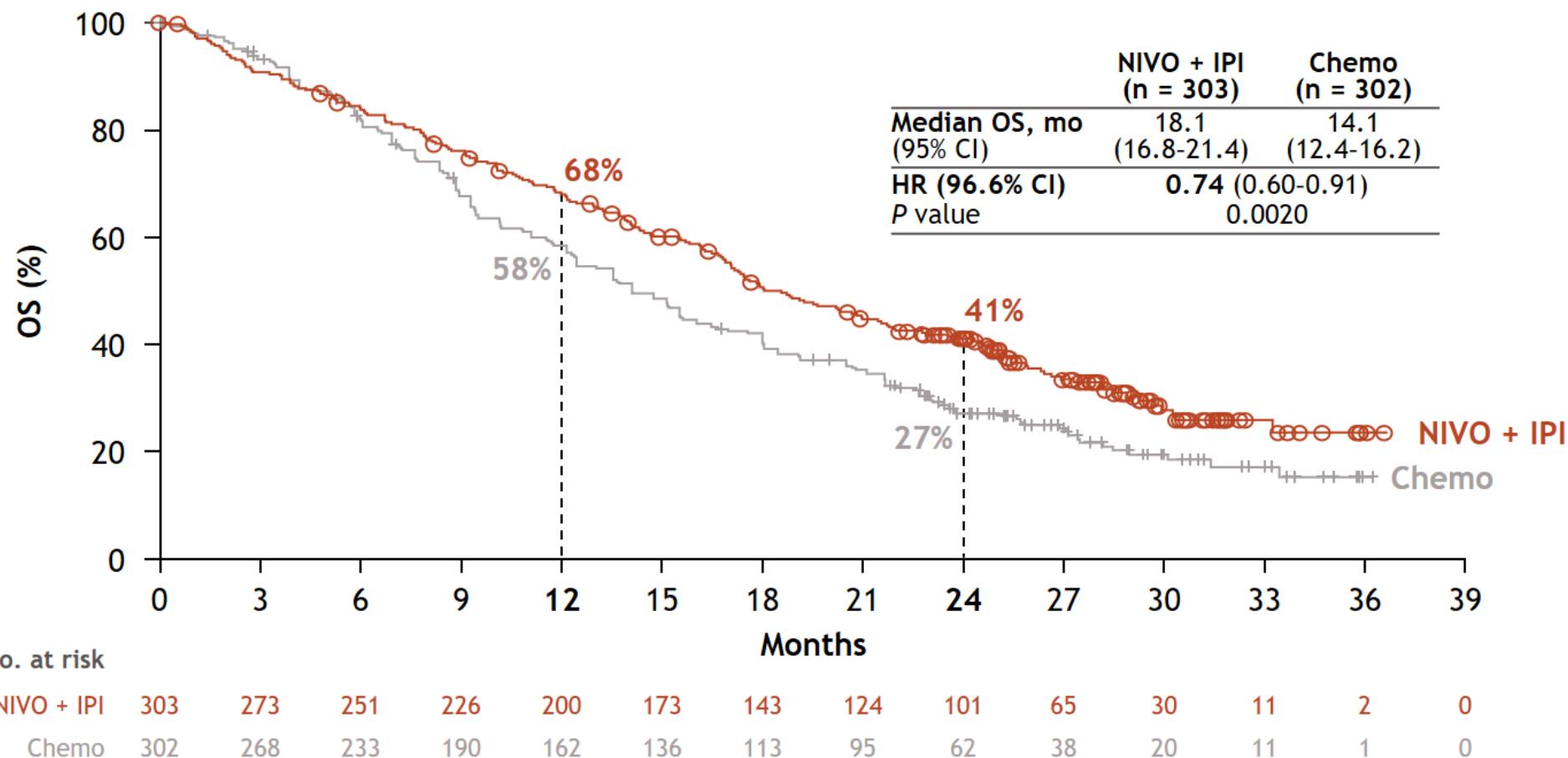


April 2020

- 1L MPM, Nivolumab + Ipilimumab vs CT, CheckMate-743
- 1L NSCLC PDL-1 $\geq 50\%$, Cemiplimab vs CT, EMPOWER-Lung 1
- 1L RCC, Nivolumab + Cabozantinib vs Sunitinib, CheckMate-9ER
- 1L CRC MSI-H, Pembrolizumab vs CT, Keynote-177

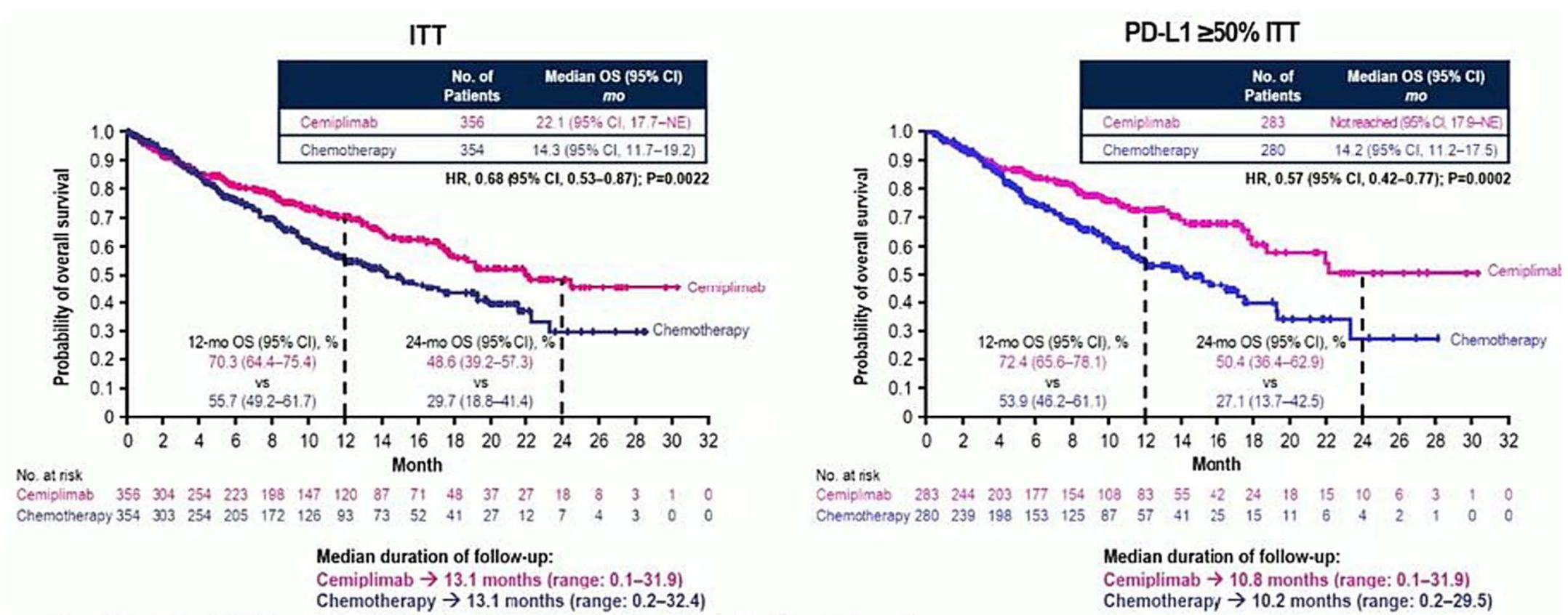
1L MPM, Nivolumab + Ipilimumab vs CT

April
2020



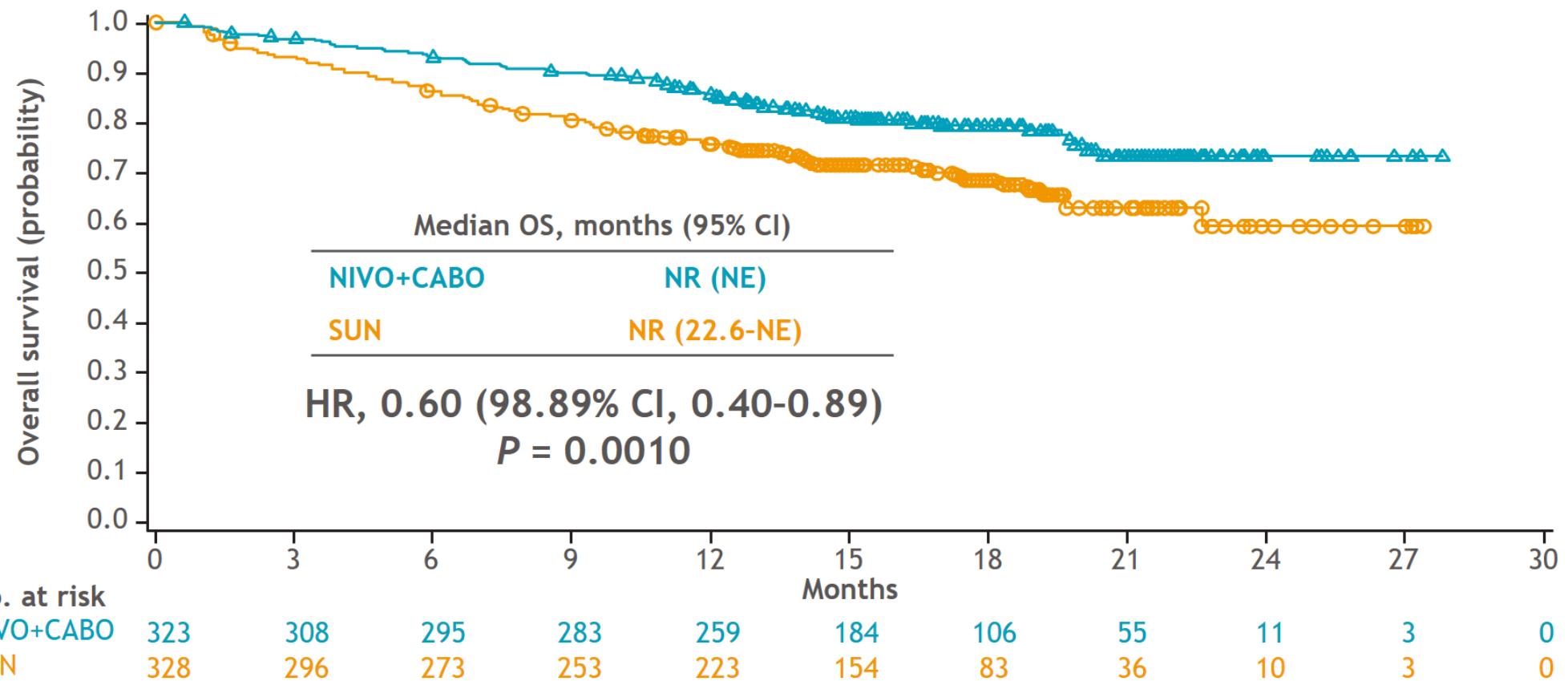
1L NSCLC PDL-1 ≥ 50%, Cemiplimab vs CT

April
2020



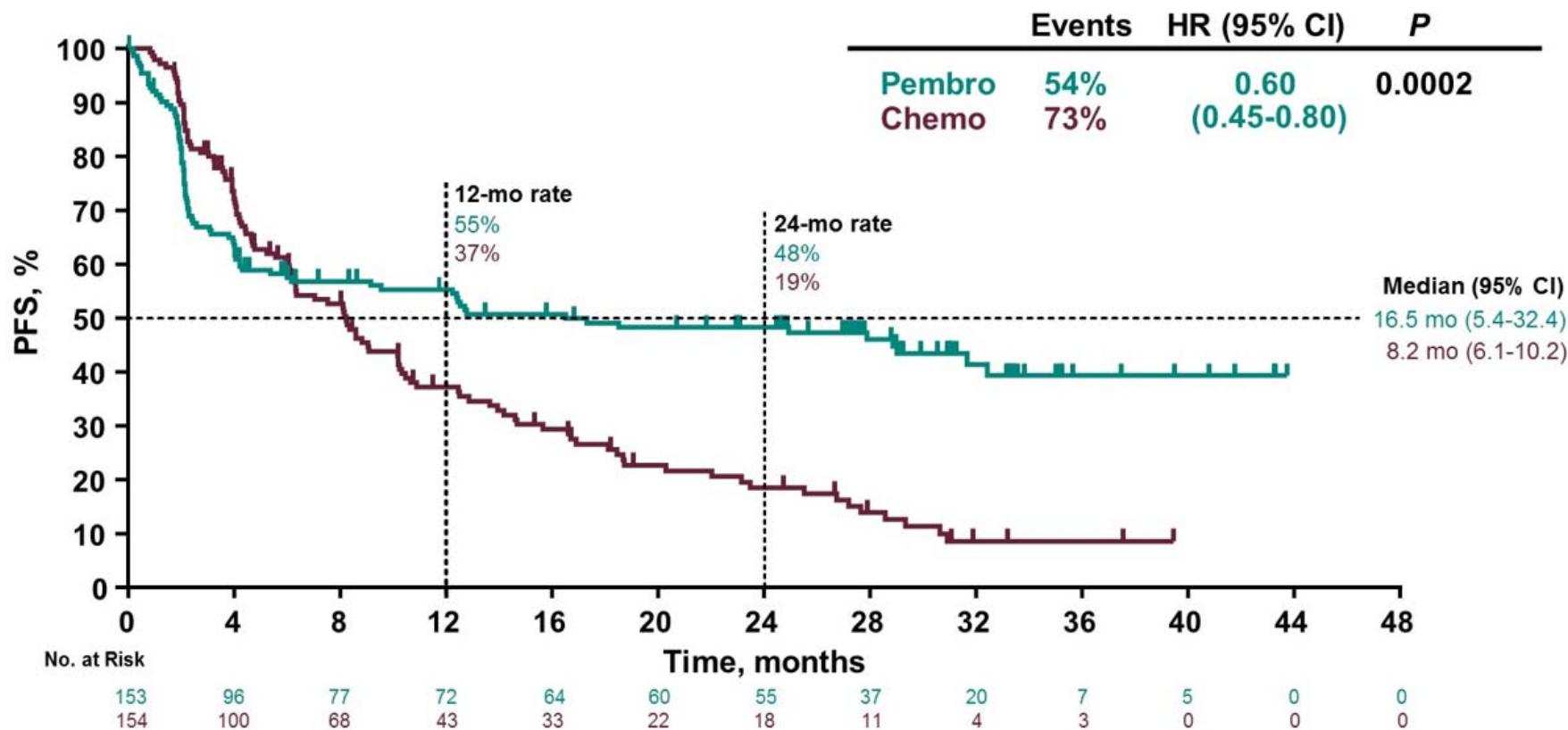
1L RCC, Nivolumab + Cabozantinib vs Sunitinib

April
2020



1L CRC MSI-H, Pembrolizumab vs CT

April
2020



Mai 2020

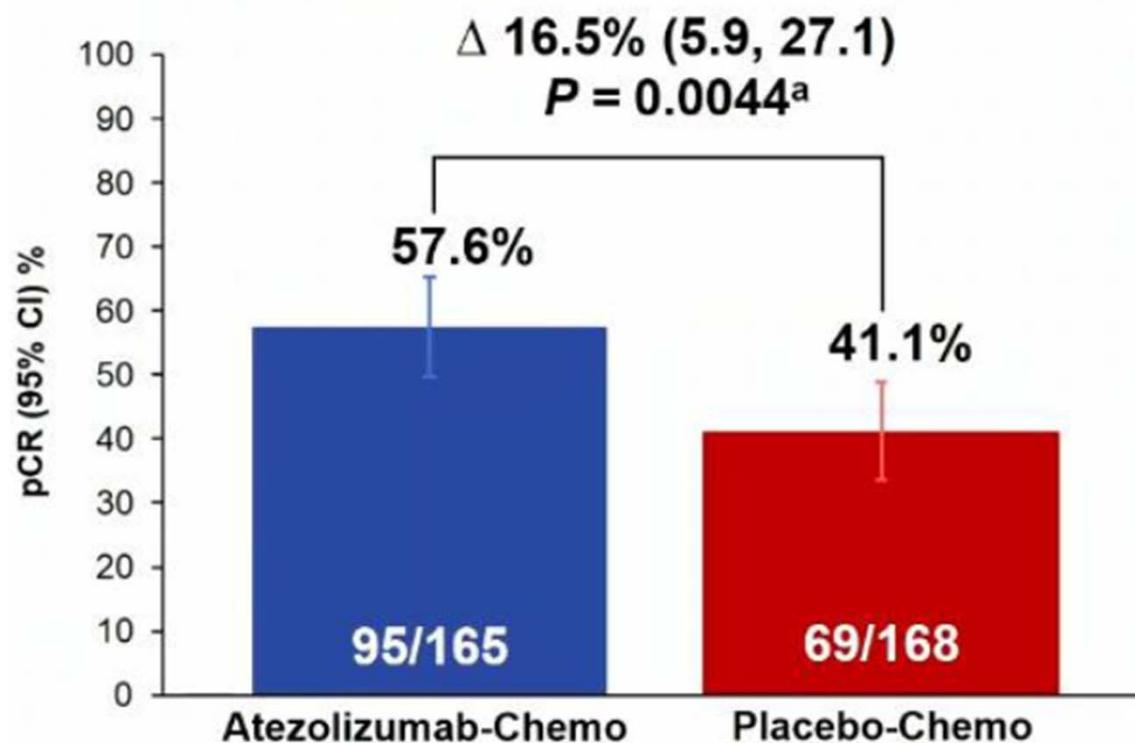
Juni 2020

- Neoadjuvant TNBC, Atezolizumab + CT vs CT, IMpassion031
- 1L UC CT + Avelumab Erhaltung, JAVELIN Bladder 100

Neoadjuvant TNBC, Atezolizumab + CT vs CT

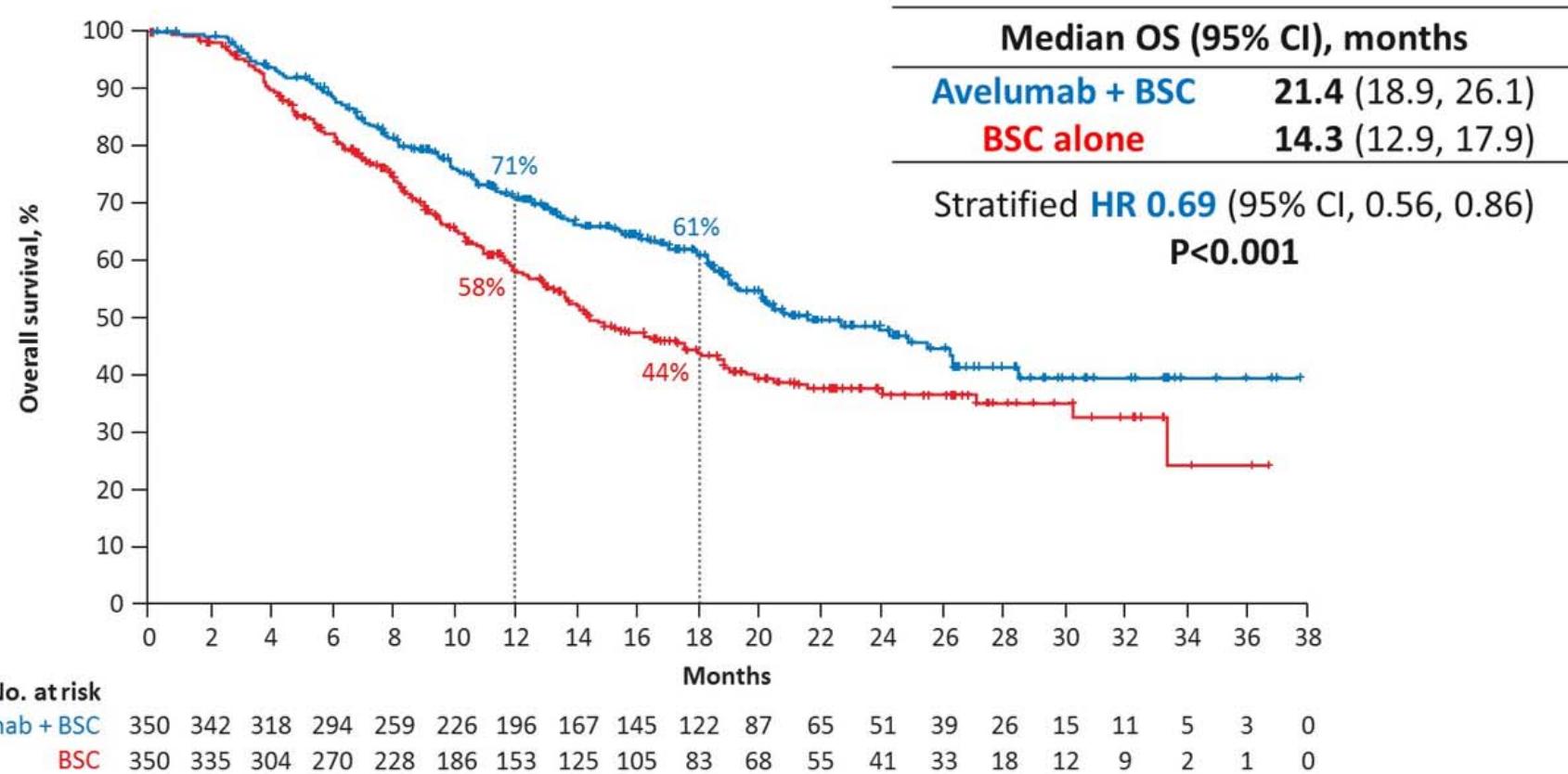
Juni
2020

pCR (95% CI), ypT0/is ypN0



1L UC CT + Avelumab Erhaltung

Juni
2020



OS was measured post randomization (after chemotherapy); the OS analysis crossed the prespecified efficacy boundary based on the alpha-spending function ($P<0.0053$)

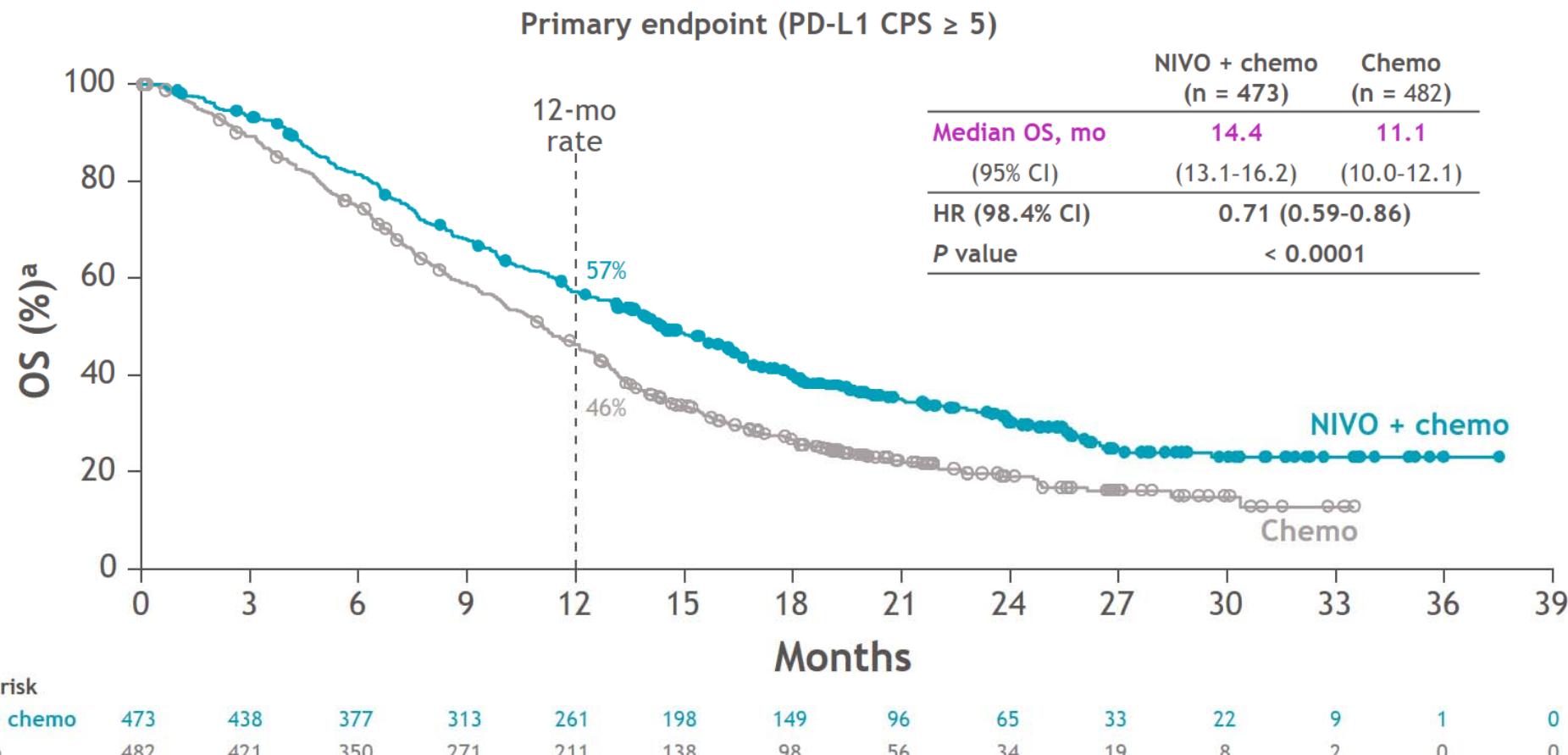
Juli 2020

August 2020

- 1L GC/GEJ/ESO Adeno, CPS \geq 5, Nivolumab + CT vs CT, CheckMate-649
- 1L ESO/GEJ, Pembrolizumab + CT vs CT, Keynote-590
- Adjuvant ESO/GEJ, Nivolumab vs Placebo, CheckMate-577

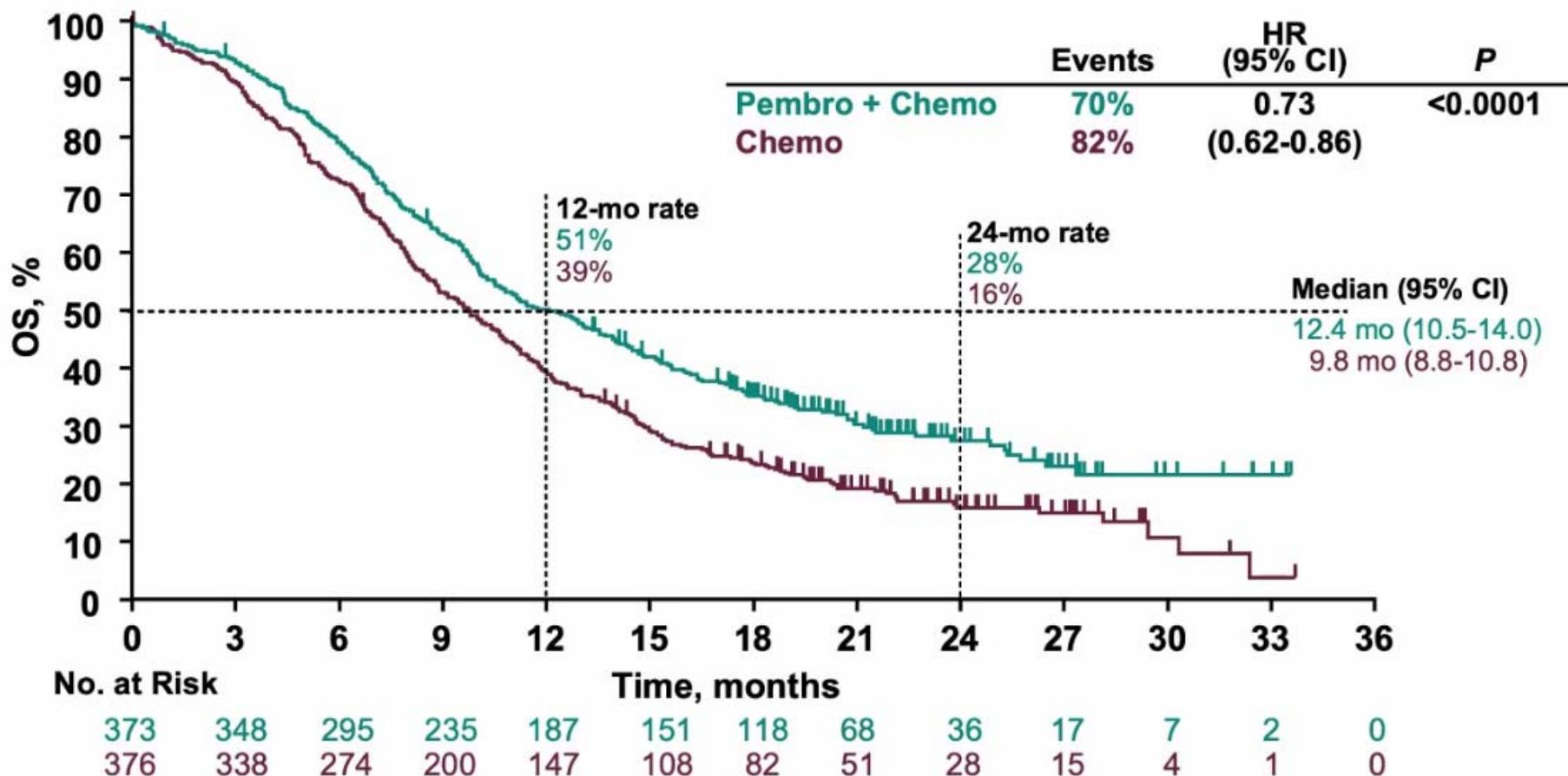
1L GC/GEJ/ESO Adeno, CPS \geq 5, Nivolumab + CT vs CT

August
2020



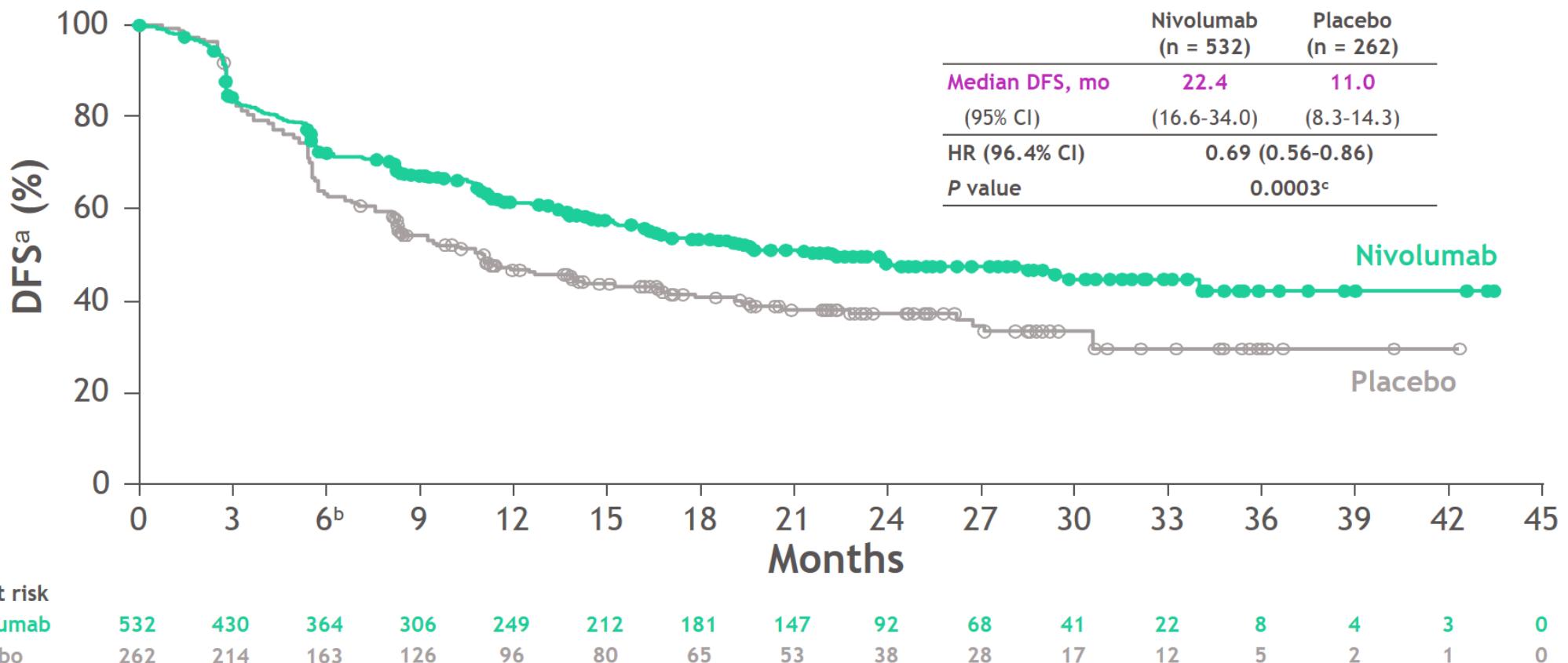
1L ESO/GEJ, Pembrolizumab + CT vs CT

August
2020



Adjuvant ESO/GEJ, Nivolumab vs Placebo

August
2020

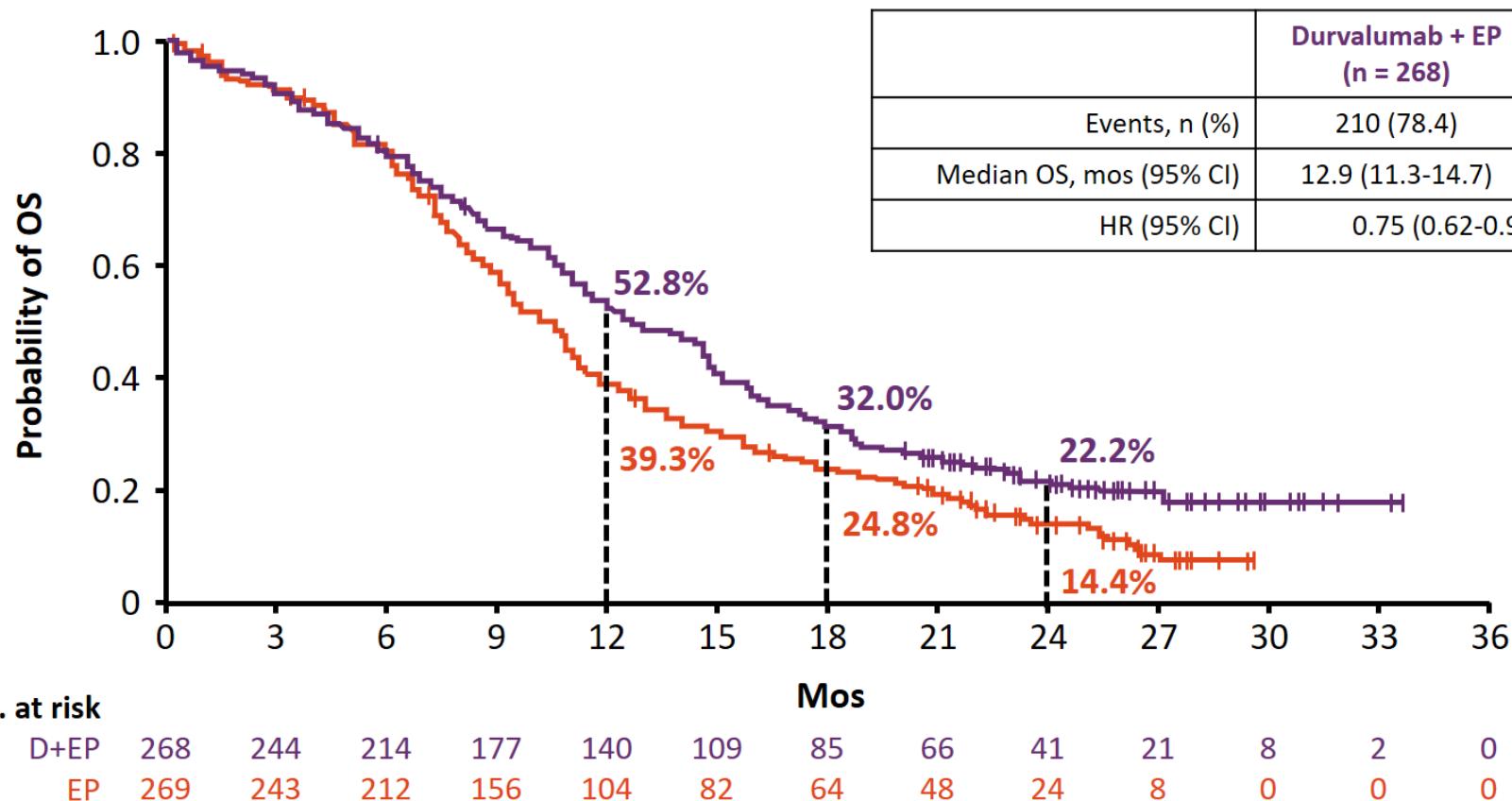


September 2020

- 1L SCLC, Durvalumab + CT, CASPIAN, EMA approval
- Adjuvant high-risk MIUC, Nivolumab vs Placebo, CheckMate-274

1L SCLC, Durvalumab + CT

September
2020



Adjuvant high-risk MIUC, Nivolumab vs Placebo

September
2020



Opdivo (nivolumab) Significantly Improves Disease Free-Survival vs. Placebo as Adjuvant Therapy for Patients with High-Risk, Muscle-Invasive Urothelial Carcinoma in Phase 3 CheckMate -274 Trial

09/24/2020

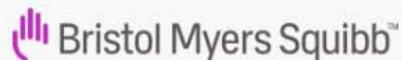
In an interim analysis, CheckMate -274 met primary endpoints of disease-free survival in both all randomized patients and in patients whose tumor cells express PD-L1 $\geq 1\%$

Oktober 2020

- Neoadjuvant NSCLC, Nivolumab + CT vs CT, CheckMate-816
- 2L ESCC, Nivolumab vs CT, ATTRACTION-03/ONO-024, CHMP opinion

Neoadjuvant NSCLC, Nivolumab + CT vs CT

October
2020



Press Release

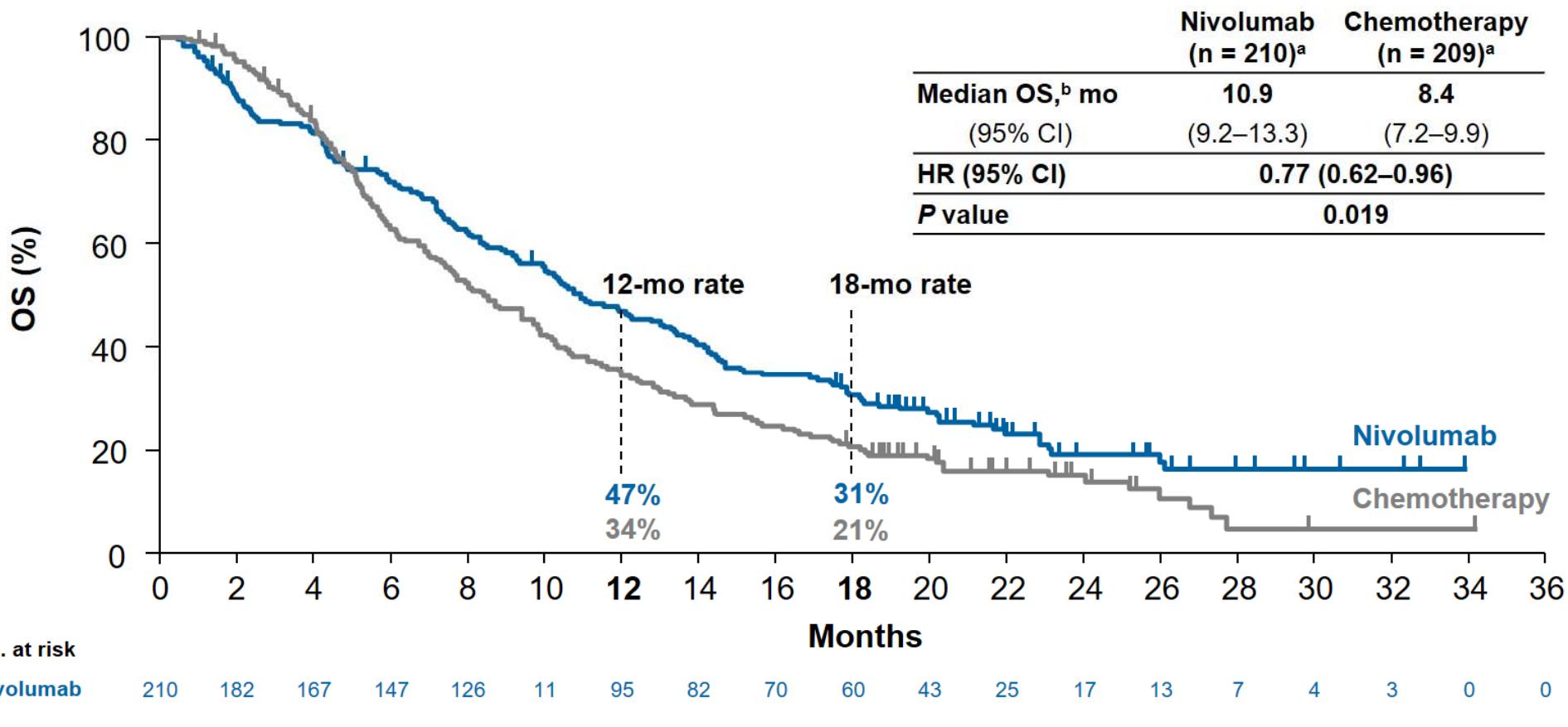
Opdivo (nivolumab) Plus Chemotherapy Shows Statistically Significant Improvement in Pathologic Complete Response as Neoadjuvant Treatment of Resectable Non-Small Cell Lung Cancer in Phase 3 CheckMate -816 Trial

OCT 07, 2020

CheckMate -816 met a primary endpoint of improved pathologic complete response in patients who received Opdivo plus chemotherapy before surgery

2L ESCC, Nivolumab vs CT

October
2020



Negative Ph III Studien

- Adjuvant MEL, Nivolumab + Ipilimumab vs Nivolumab, CheckMate-915
- Adjuvant MIUC, Atezolizumab vs Observation, IMvigor010
- 1L UC, Pembrolizumab + CT vs CT, Keynote-361
- 1L UC, Durvalumab +/- Tremelimumab vs CT, DANUBE
- 1L TNBC, Atezolizumab + Paclizaxel vs Paclitaxel, IMpassion131

Zusammenfassung

- Vielzahl positiver Ph III Studien, einige negative
- Nivolumab und Pembrolizumab dominieren auch Highlights 2020
- Fortschritte in unterschiedlichen Tumorentitäten: LC, GI, RCC & UC, HL, TNBC, MEL, H&N
- Überwiegend Erstlinienbehandlung metastasierter Tumoren, vereinzelt (neo)adjuvant oder spätere Linien
- Chemotherapie bevorzugter Kombinationspartner, vereinzelt duale IO, TKIs, targeted therapies oder Monotherapie
- Weiterhin Bedarf an Biomarker und „cold tumors“ für 2021
- Stichtag 17.10 „nur“ 2 EMA Zulassungen 2020 (+ 3x pos. CHMP opinion)
- Vielzahl an EMA Zulassungen 2021

