

CELESTIAL-RRCLL
CLL-RR1

A Phase 3, Randomized, Open-Label, Multicenter Study of Sonrotoclax (BGB-11417) Plus Anti-CD20 Antibody Therapies vs Venetoclax Plus Rituximab in Patients With Relapsed/Refractory Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma

2137

Othman Al-Sawaf,¹ Sandra Robrecht,¹ Matthew S. Davids,² Mary Ann Anderson,^{3,4} Romain Gui  ze,⁵ Valeria Buccheri,⁶ Celso Arrais-Rodrigues,⁷ Francesc Bosch,⁸ Ruth Clifford,⁹ Michael Doubek,¹⁰ Krzysztof Jamrozia  k,¹¹ Arnon P. Kater,¹² Mattias Mattsson,¹³ Carsten U. Niemann,¹⁴ Miguel A. Pavlovsky,¹⁵ Lydia Scarf  ,^{16,17} Renata Walewska,¹⁸ Peng Liu,¹⁹ Ki-Seong Eom,²⁰ Karl-Anton Kreuzer,¹ Eugen Tausch,²¹ Christof Schneider,²¹ Stephan Stilgenbauer,²¹ Kirsten Fischer,¹ Michael Hallek,¹ Ken Wu,²² Marcus Lefebure,²³ Wei Ding,²² Remus Vezan,²² Barbara F. Eichhorst¹

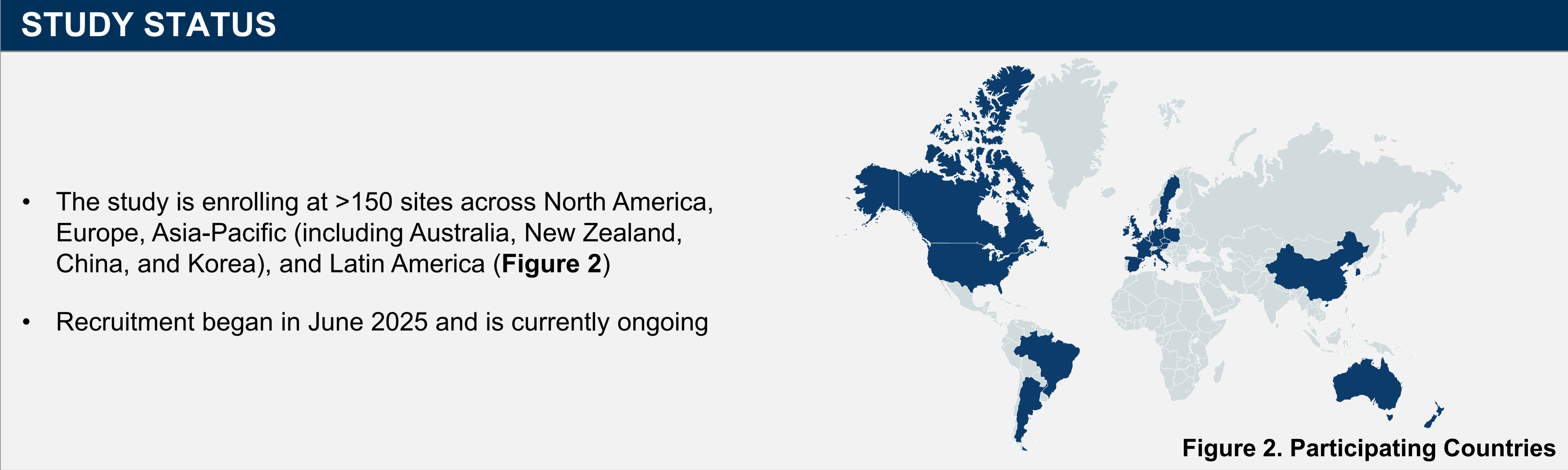
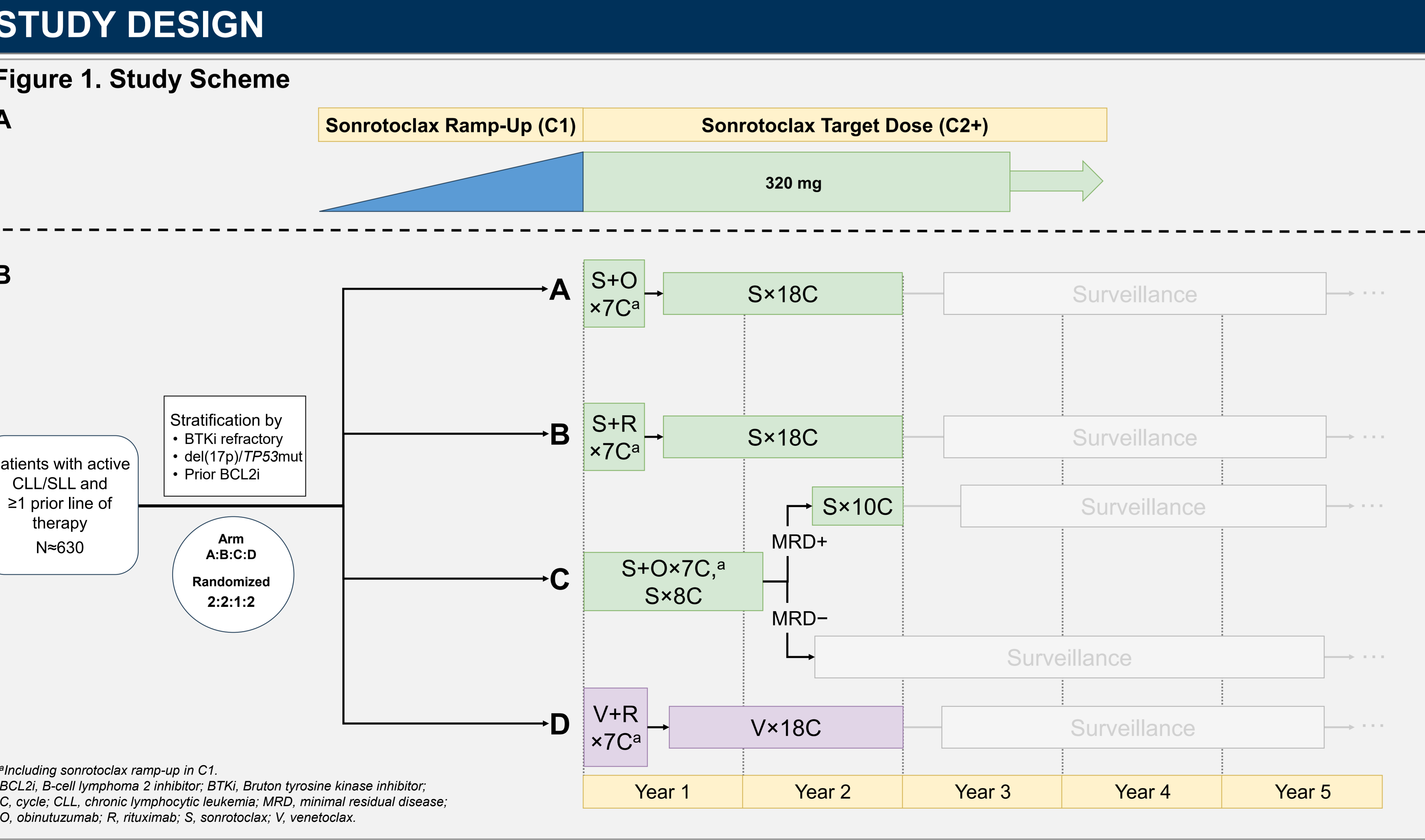
¹University Hospital of Cologne, K  ln, Germany; ²Dana-Farber Cancer Institute, Boston, MA, USA; ³Royal Melbourne Hospital and Peter MacCallum Cancer Centre, Melbourne, VIC, Australia; ⁴The Walter and Eliza Hall Institute, Melbourne, VIC, Australia; ⁵CHU de Clermont-Ferrand, Clermont-Ferrand, France; ⁶Hospital das Cl  nicas da Faculdade de Medicina da Universidade de S  o Paulo, S  o Paulo, Brazil; ⁷Hospital 9 de Julho, S  o Paulo, Brazil; ⁸University Hospital Vall d'Hebron, Vall d'Hebron Institute of Oncology (VHIO), Barcelona, Spain; ⁹University Hospital Limerick, Limerick, Ireland; ¹⁰University Hospital Brno, Brno, Czechia; ¹¹Medical University of Warsaw, Warsaw, Poland; ¹²Lymphoma and Myeloma Research Amsterdam, Amsterdam, the Netherlands; ¹³Uppsala University Hospital, Uppsala, Sweden; ¹⁴Rigshospitalet, Copenhagen University Hospital, Copenhagen, Denmark; ¹⁵FUNDALEU, Clinical Research Center, Buenos Aires, Argentina; ¹⁶Universit   Vita Salute, Milano, Italy; ¹⁷Comprehensive Care Center, IRCCS Ospedale San Raffaele, Milano, Italy; ¹⁸University Hospitals Dorset, Bournemouth, UK; ¹⁹Affiliated Zhongshan Hospital of Fudan University, Shanghai, China; ²⁰Seoul St. Mary's Hospital, The Catholic University of Korea, Seoul, South Korea; ²¹Ulm University, Ulm, Germany; ²²BeOne Medicines, Ltd, San Carlos, CA, USA; ²³BeOne Medicines, Ltd, London, UK

INTRODUCTION

- For patients with relapsed/refractory (R/R) chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL), treatment options remain limited. Venetoclax plus rituximab (VR) is the only approved fixed-duration regimen, but many patients do not reach deep undetectable minimal residual disease (uMRD) responses and most eventually experience relapse¹
- The type II anti-CD20 antibody obinutuzumab has shown superior efficacy compared with rituximab in the frontline setting, although randomized data in R/R disease are not yet available and obinutuzumab is not widely accessible for these patients²
- Sonrotoclax (BGB-11417), a next-generation BCL2 inhibitor, is a more selective and pharmacologically potent inhibitor of BCL2 than venetoclax, with a shorter half-life and no drug accumulation. Early data suggest encouraging antitumor activity in R/R CLL^{3,4}

STUDY OBJECTIVE

- To investigate whether sonrotoclax in combination with anti-CD20 antibodies can improve clinical outcomes compared with venetoclax-based therapy and to explore MRD-guided vs fixed-duration treatment strategies



STUDY DETAILS

- Patient population:** ≈630 adults with R/R CLL/SLL after ≥1 prior therapy (≥80% previously treated with targeted agents); patients with Richter transformation are excluded
 - Patients with prior BCL2 inhibitor treatment are eligible if they achieved a remission lasting ≥3 years and have been off treatment for ≥2 years
- Stratification:** by del(17p)/TP53 mutation status, prior BCL2 inhibitor treatment, and refractoriness to prior BTK inhibitor
- Treatment:**
 - Oral sonrotoclax and oral venetoclax will be initiated using a ramp-up to the target dose of 320 mg and 400 mg, respectively
 - Rituximab will be administered intravenously at 375 mg/m² on day 1 of cycle 2 and at 500 mg/m² on day 1 of cycles 3 through 7
 - Obinutuzumab will be administered intravenously at 1,000 mg on days 1/2, 8, and 15 of cycle 2 and on day 1 of cycles 3 through 7
- Primary endpoint:** progression-free survival (PFS) with sonrotoclax plus obinutuzumab vs VR, assessed by blinded independent review committee (BIRC)
- Key secondary (powered) endpoint:** PFS with sonrotoclax plus rituximab vs VR by BIRC
- Other secondary and exploratory endpoints:** uMRD and complete response rates, overall survival, safety, and evaluation of MRD-guided treatment duration and molecular predictors of response

REFERENCES

- Seymour JF, et al. *N Engl J Med*. 2018;378(12):1107-1120.
- Eichhorst B, et al. *N Engl J Med*. 2023;388(19):1739-1754.
- Liu J, et al. *Blood*. 2024;143(18):1825-1836.
- Cheah CY, et al. EHA 2025. Abstract S159.

ACKNOWLEDGMENTS

The authors thank the patients and their families, investigators, co-investigators, and the study teams at each of the participating centers. This study is sponsored by BeOne Medicines, Ltd and is co-developed and run in collaboration with the German CLL Study Group (GCLLSG). Editorial assistance was provided by Nucleus Global, an Inizio company, and supported by BeOne Medicines, Ltd

NCT06943872

