

Clinical Benefit in Biomarker-Positive Patients (pts) With Locally Advanced or Metastatic Solid Tumors Treated With the PARP1/2 Inhibitor Pamiparib in Combination With Low-Dose (LD) Temozolomide (TMZ)

Agostina Stradella¹, Melissa Johnson², Sanjay Goel³, Sreenivasa R. Chandana⁴, Matthew D. Galsky⁵, Emiliano Calvo⁶, Victor Moreno⁷, Haeseong Park⁸, Tobias Arkenau⁹, Andrés Cervantes¹⁰, Lorena Fariñas-Madrid¹¹, Linda Mileskin¹², Siqing Fu¹³, Ruth Plummer¹⁴, Jeff Evans¹⁵, Lisa Horvath¹⁶, Amy Prawira¹⁷, Kunbin Qu¹⁸, Robert J. Pelham¹⁹, and Minal Barve²⁰

¹Institut Catala, Barcelona, Spain; ²Sarah Cannon Research Institute, Tennessee Oncology, Nashville, TN, USA; ³Medical Oncology, Montefiore Medical Center, Bronx, NY, USA; ⁴START Midwest, Grand Rapids, Michigan, USA; ⁵Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai, New York, NY, USA; ⁶START Madrid - CIOCC, Centro Integral Oncológico Clara Campal, Hospital Madrid Norte Sanchinarro, Madrid, Spain; ⁷START Madrid - FJD, Hospital Fundación Jiménez Díaz, Madrid, Spain; ⁸Medical Oncology, Washington University, St. Louis, MO, USA; ⁹Sarah Cannon Research Institute, London, UK; ¹⁰Medical Oncology, Biomedical Research Institute, Incliva, and University of Valencia, Valencia, Spain; ¹¹Vall d'Hebron, Barcelona, Spain; ¹²Peter MacCallum Cancer Centre, Melbourne, Australia; ¹³Department of Investigational Cancer Therapeutics, Division of Cancer Medicine, MD Anderson, Houston, TX, USA; ¹⁴Sir Bobby Robson Cancer Trials Research Centre, Translational and Clinical Research Institute, Newcastle University, Newcastle UK; ¹⁵Beatson West of Scotland Cancer Centre, University of Glasgow, Glasgow, UK; ¹⁶Chris O'Brien Lifehouse, Sydney, Australia; ¹⁷St Vincent's Hospital, Sydney, Australia; ¹⁸Biomarker Development & Translational Research, BeiGene USA, Inc., San Mateo, CA, USA; ¹⁹CDx and Biomarker Development, BeiGene USA, Inc., San Mateo, CA, USA; ²⁰Medical Oncology, Mary Crowley Cancer Research, Dallas, TX, USA

Background: DNA damage caused by the alkylator TMZ can sensitize tumors to PARP inhibitors. Pamiparib, an investigational oral PARP1/2 inhibitor, has shown PARP-DNA complex trapping activity, brain penetration, and synergistic cytotoxicity with LD TMZ in nonclinical studies and preliminary antitumor activity in pts with solid tumors.

Methods: This ongoing phase 1b study consists of a dose-escalation (3+3 design) and dose-expansion phase. In dose escalation, pts received pamiparib 60 mg PO BID on Days 1-28 and LD TMZ at escalating doses PO QD on Days 1-7, 1-14, or 1-28 of each 28-day cycle. Dose-expansion pts, including pts with gastric cancer and SCLC with 1-2 prior lines of chemotherapy, were treated at the recommended phase 2 dose of pamiparib 60 mg PO BID on Days 1-28 and LD TMZ 60 mg PO QD on Days 1-7. Tumor assessments occurred every 8 weeks. Endpoints were safety/tolerability (CTCAE v4.03) and antitumor activity (RECIST v1.1). Biomarker assessments included determination of DDR mutational status (SNV/CNV homozygous loss) of 16 core DDR genes in circulating tumor DNA and genomic instability score (GIS) by the Myriad myChoice® HRD test. Herein, we present data from the biomarker analysis.

Results: As of 10 April 2020, 114 pts were enrolled (n=66, dose escalation; n=48, dose expansion). Median follow-up was 8.5 mo (range: 0.3, 26.5). Of 36 pts analyzed for GIS, 11

(31%) were GIS positive (GIS⁺ ≥33), with an ORR of 82% and disease control rate (DCR) of 91% across multiple tumor types. Antitumor activity was observed in *BRCA*^m/GIS⁺ (n=5; ORR and DCR, 100%) and *BRCA*^w/GIS⁺ pts (n=6; ORR, 67%; DCR, 83%). Responses were observed in 3 GIS⁻ pts with pancreatic cancer, pheochromocytoma, and nonsquamous NSCLC (ORR=12%; DCR, 52%). Of 104 pts analyzed for DDR mutational status, 27 (26%) were DDR⁺, with an ORR of 26% and DCR of 52%. In DDR⁻ pts, ORR was 14% and DCR was 67%. Five pts were both GIS⁺ and DDR⁺.

Conclusions: In this limited subset of pts analyzed for GIS status, GIS⁺ pts derived superior benefit from pamiparib + LD TMZ, irrespective of *BRCA* status. GIS status appears to be the most robust biomarker to predict response to pamiparib + LD TMZ.

Clinical trial registry number: NCT03150810