Research Area:

Advanced Non-Central Nervous System Tumors

Talimogene Laherparepvec Amgen Study ID Number: 20110261 NCT Number: 02756845 EudraCT Number: 2015-003645-25

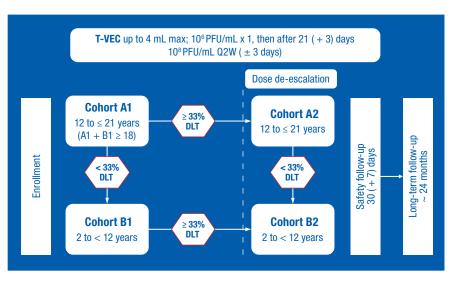
A Phase 1, Multicenter, Open-label, Dose De-escalation Study to Evaluate the Safety and Efficacy of Talimogene Laherparepvec in Pediatric Subjects With Advanced Non–Central Nervous System (CNS) Tumors That Are Amenable to Direct Injection

Primary Endpoint:

Incidence of dose-limiting toxicities (DLTs)

Key Secondary Endpoints:

- Efficacy: overall response rate, duration of response, time to response, time to progression, progression-free survival using modified Immune-Related Response Criteria Simulating Response Evaluation Criteria In Solid Tumors (irRC-RECIST), and overall survival
- Safety: subject incidence of adverse events and significant laboratory abnormalities



DLT: dose-limiting toxicity; PFU: plaque-forming unit; Q2W: once every 2 weeks; T-VEC: talimogene laherparepvec DLT evaluation period is 35 days. If dose de-escalation is needed and if permissible based on the incidence of DLTs, a minimum of six additional subjects may be enrolled and treated at a lower dose level of T-VEC (4 mL max; 10° PFU/mL x 1, then after 21 [+ 3] days, 10° PFU/mL Q2W [± 3 days]). Subjects to be followed for survival and use of subsequent anticancer therapies every 12 weeks (± 28 days) from the safety follow-up visit until death.

Products under investigational study have not been approved by any regulatory authority for the use under investigation in this trial.



Talimogene Laherparepvec

Key Summary Points:

This phase 1, multicenter, open-label study is designed to determine the safety and tolerability of talimogene laherparepvec in pediatric subjects with advanced non-CNS tumors that are amenable to direct injection in the clinical setting.

Approximately 18 – 24 treated pediatric subjects will be enrolled into two cohorts stratified by age (permissible based on the incidence of DLTs). Initially, three subjects aged 12 to ≤ 21 years will be enrolled and treated at 100% of the recommended adult dose regimen of talimogene laherparepvec (cohort A1). Once cohort A1 is determined safe by the dose level review team. the younger cohort B1 (2 to < 12 years) will be opened for enrollment.

Key Schedule of Assessments:

 Radiographic scans and clinical tumor assessments at week 8, week 16, and then every 12 weeks

Key Inclusion Criteria:

- Subjects aged 2 to ≤ 21 years with histologically or cytologically confirmed non-CNS solid tumors that recurred after standard/frontline therapy, or for which there is no standard/frontline therapy available
- Measurable or nonmeasurable disease eligible for intralesional injection only into injectable cutaneous, subcutaneous, and nodal tumors with or without image guidance (Note: visceral lesions, and bone lesions without soft-tissue component are not eligible for injection)
- Performance status:
 - Karnofsky score \geq 70% for subjects aged 12 to \leq 21 years
 - Lansky play scale ≥ 70% for subjects aged 2 to < 12 years
- Life expectancy > 4 months from the date of enrollment
- Adequate hematological, renal, coagulative, and hepatic function

Kev Exclusion Criteria:

- Diagnosis of leukemia, non-Hodgkin's lymphoma, Hodgkin's disease, or other hematologic malignancy
- CNS tumor or clinically active brain metastases
- Primary ocular or mucosal melanoma
- Radiotherapy to the bone marrow within 6 weeks prior to enrollment
- History or evidence of xeroderma pigmentosum
- History of other malignancy within the past 5 years (except if treated with curative intent, no presence of active disease, last chemotherapy > 5 years before enrollment, and at low risk of recurrence)
- Prior treatment with talimogene laherparepvec or any other oncolytic virus, or a tumor vaccine; received chemotherapy, radiotherapy, biological cancer therapy, or undergone major surgery within 14 days prior to enrollment
- History or evidence of active autoimmune disease requiring systemic treatment with steroids or immunosuppressive agents, or evidence of clinically significant immunosuppression
- Active herpetic skin lesions or prior complications of herpetic infection; requiring intermittent or chronic treatment with an antiherpetic drug (eg, acyclovir), other than intermittent topical use

Additional Information:

- www.amgentrials.com Protocol Number: 20110261
- www.clinicaltrials.gov Identifier: NCT02756845
- eudract.ema.europa.eu EudraCT Number: 2015-003645-25

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