

Research Area:

Solid Tumors

AMG 193

Amgen Study ID Number: 20210023

NCT Number: 05094336

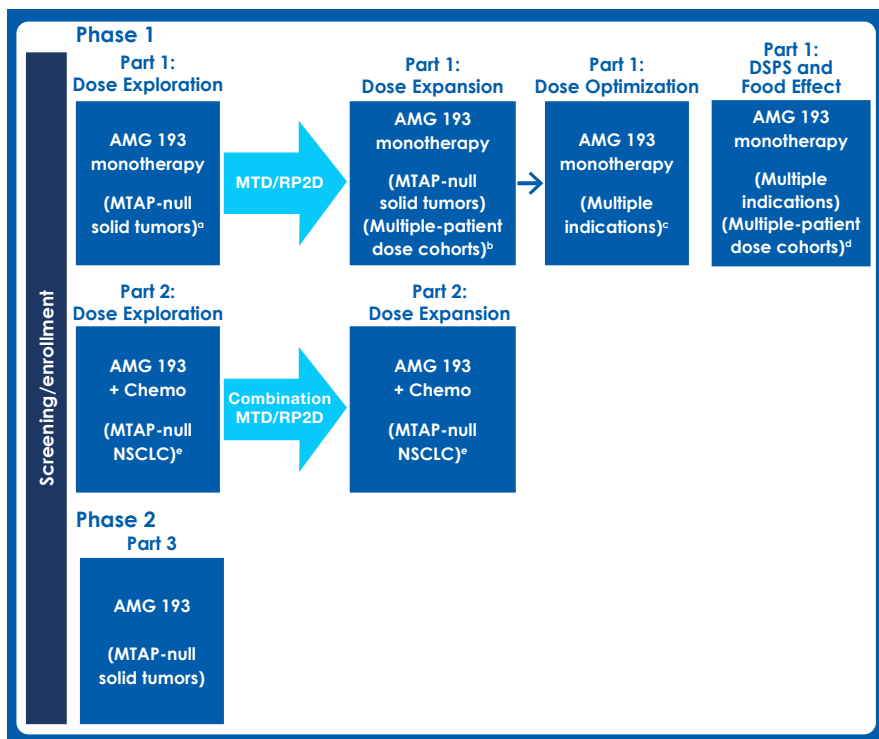
A Phase 1/1b/2 Study Evaluating the Safety, Tolerability, PK, PD, and Efficacy of AMG 193 Alone and in Combination With Docetaxel in Subjects With Advanced MTAP-Null Solid Tumors

Primary Endpoints:

- Parts 1 and 2: Safety and tolerability
- Part 3: ORR

Key Secondary Endpoints:

- Parts 1 and 2: PK
- Parts 1, 2, and 3: DCR, DoR, TTR, duration of SD, PFS, and OS
- Part 3 only: Safety



^aPart 1a: MTAP-null solid tumors; ^bPart 1c: MTAP-null or lost MTAP expression NSCLC; Part 1e: MTAP-null BTC; Part 1f: MTAP-null HNSCC; Part 1g: MTAP-null pancreatic adenocarcinoma; Part 1h: MTAP-null or lost MTAP expression solid tumors [other than lymphoma or primary brain tumor]; ^cPart 1i (dose optimization): Indication criteria based on the expansion arm from which the patients were enrolled; ^dPart 1j: DSPS substudy enrolling patients from Part 1a; Part 1k: Food effect substudy – patients from different expansion arms of the study; ^eParts 2a and 2b: MTAP-null NSCLC.

Molecules under investigational study have not been approved by the FDA for uses associated with such clinical trial investigation.

AMGEN

Key Summary Point:

This is an open-label, phase 1/1b/2 study evaluating the safety, tolerability, PK, PD, and efficacy of AMG 193 alone and in combination with chemotherapy in adult subjects with metastatic or locally advanced MTAP-null solid tumors

BTC, biliary tract cancer; CDKN2A, cyclin-dependent kinase inhibitor 2A; Chemo, chemotherapy; DCR, disease control rate; DoR, duration of response; DSPS, drug substance particle size; ECOG PS, Eastern Cooperative Oncology Group performance status; FDA, Food and Drug Administration; FFPE, formalin-fixed, paraffin embedded; HCV, hepatitis C virus; HIV, human immunodeficiency virus; HNSCC, head and neck squamous cell carcinoma; MAT2A, methionine adenosyltransferase 2a; MTAP, methylthioadenosine phosphorylase; MTD, maximum tolerated dose; NSCLC, non-small cell lung cancer; ORR, objective response rate; OS, overall survival; PCR, polymerase chain reaction; PD, pharmacodynamics; PFS, progression-free survival; PK, pharmacokinetics; PRMT5, protein arginine methyltransferase 5; RECIST, Response Evaluation Criteria in Solid Tumors; RNA, ribonucleic acid; RP2D, recommended phase 2 dose; SARS-CoV-2, severe acute respiratory syndrome coronavirus 2; SD, stable disease; TTR, time to response

Key Inclusion Criteria:

- Adults (≥ 18 years old) with histologically confirmed metastatic or locally advanced solid tumors not amenable to curative treatment with surgery and/or radiation
- Evidence of homozygous loss of CDKN2A (null) [Parts 1a/j/k and Part 2a only] and/or MTAP (null) in the tumor tissue or blood (Parts 1a–1k, Parts 2a/b) or lost MTAP expression in the tumor tissue (Parts 1a–1k, Parts 2a/b)
- Measurable disease per RECIST v1.1 criteria
- ECOG PS of ≤ 1
- Adequate hematopoietic, renal, cardiac, and liver function
- Life expectancy ≥ 12 weeks in the opinion of the investigator
- A total of 25 slides of archived tumor tissue FFPE (sample collected within 5 years) or an archival block must be available
- For Part 1f (MTAP-null or lost MTAP expression HNSCC): Must be willing to undergo tumor biopsy
- For Part 1a: Must be willing to undergo tumor biopsy, before the start of and while on treatment
- Part 1i: Enrollment criteria to match the criteria of the expansion arm from which the indication was selected
- Part 1j: Must be willing to participate in DSPS substudy
- Part 1k: Must be able and willing to eat a standardized high-fat, high-caloric meal and fast for ≥ 6 hours

Key Exclusion Criteria:

- Spinal cord compression or untreated brain metastases or leptomeningeal disease
- Evidence of current interstitial lung disease or active SARS-CoV-2 infection
- History of other malignancy within the past 2 years
- Active infection
- History of solid organ transplant
- Prior treatment with an MAT2A inhibitor or a PRMT5 inhibitor or docetaxel [Part 2 only]
- Unresolved toxicity from prior anticancer therapy
- Diagnosis of congenital short QT syndrome
- Known positive test for HIV
- Major surgery
- Prior irradiation to 25% of the bone marrow
- Live vaccine therapy within 4 weeks before study drug administration
- Positive hepatitis B surface antigen or positive HCV RNA by PCR

Additional Information:

- www.clinicaltrials.gov Identifier—NCT05094336

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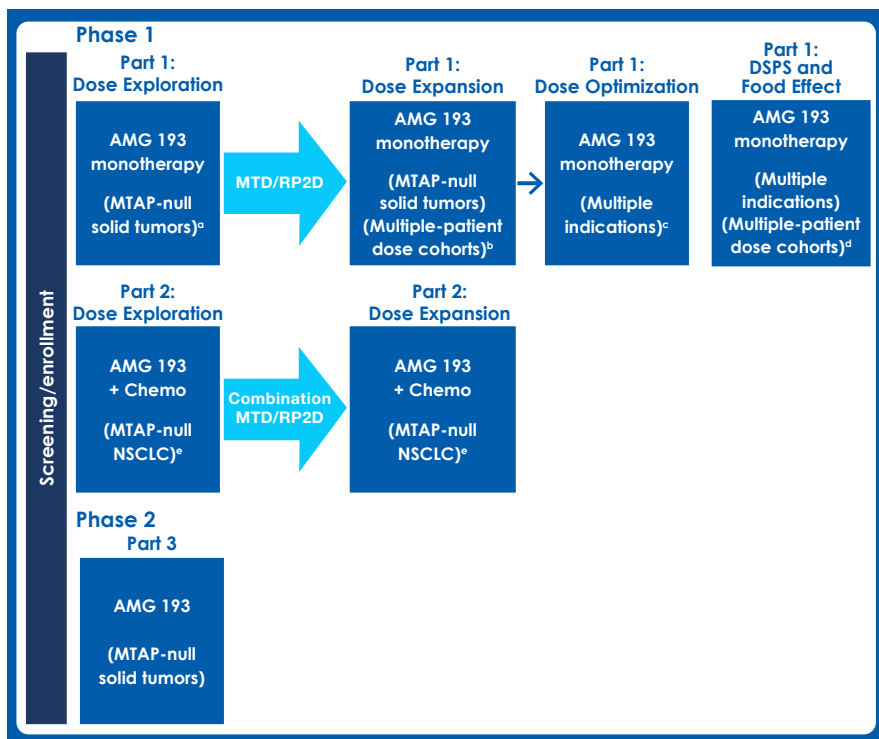
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