



GASTRO
Journal Club

L'importanza della ricerca in Oncologia

10-11 OTTOBRE 2019 - ROMA

VOI Donna Camilla Savelli Hotel - Via Garibaldi, 27

**La ricerca clinica in Italia e in Europa:
Studi in corso. aMANTRA STUDY**

DISCUSSANT: A. Falcone, M. Scartozzi

α -MANTRA STUDY

Phase II randomized study of maintenance regorafenib vs placebo in no progression patients after first-line platinum and fluoropyrimidines based chemotherapy in HER2 negative locally advanced/metastatic gastric or gastroesophageal junction cancer

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BACKGROUND

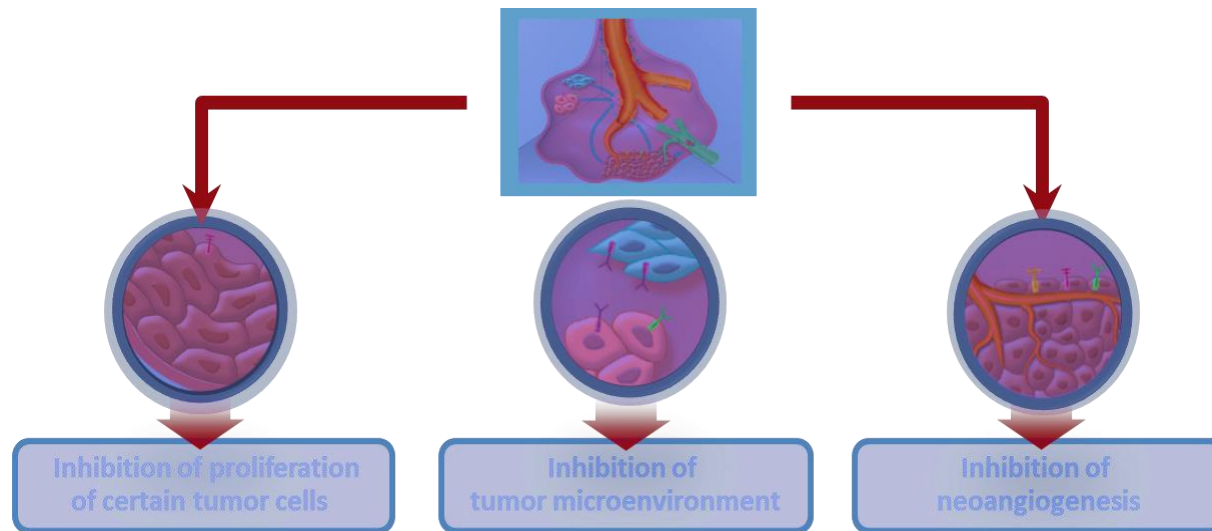
- 78-80% advanced gastric or GEJ adenocarcinoma HER-2 no amplified -> NO TARGETED therapies.
- Standard chemotherapy in first line with double or triple cytotoxic chemotherapy regimens with OS = 7-11 months compared to BSC.
- Only 45% of the population is eligible for second-line treatment, reinforces the need to extend the time to progression in the subgroup of patients with stable disease after first line chemotherapy.

BACKGROUND AND RATIONALE

- The angiogenic upregulation is correlated to poor prognosis and survival in gastric cancer patients.
- Upregulation of *VEGF-VEGFR* signaling axis (endothelial cell growth, migration, and survival from preexisting vasculature, vessel permeability).
- Balance between *Angiopoietin 1* (promoting cell death and disrupting vascularization), and *Angiopoietin 2* (vessel maturation, adhesion, migration, and survival) is important in neoangiogenesis process.



REGORAFENIB – MECHANISM OF ACTION



Regorafenib is an oral multikinase inhibitor and deactivates tumors across three dimensions:

- Angiogenesis (VEGFR1-3, TIE2)
- Oncogenesis (KIT, PDGFR, RET)
- Stromagenesis (PDGFR- β , FGFR)

Biochemical Activity	IC ₅₀ mean \pm SD nmol/l (n)
VEGFR1	13 \pm 0.4 (2)
Murine VEGFR2	4.2 \pm 1.6 (10)
Murine VEGFR3	46 \pm 10 (4)
TIE2	311 \pm 46 (4)
PDGFR- β	22 \pm 3 (2)
FGFR1	202 \pm 18 (6)
KIT	7 \pm 2 (4)
RET	1.5 \pm 0.7 (2)
RAF-1	2.5 \pm 0.6 (4)
B-RAF	28 \pm 10 (6)
B-RAF ^{V600E}	19 \pm 6 (6)

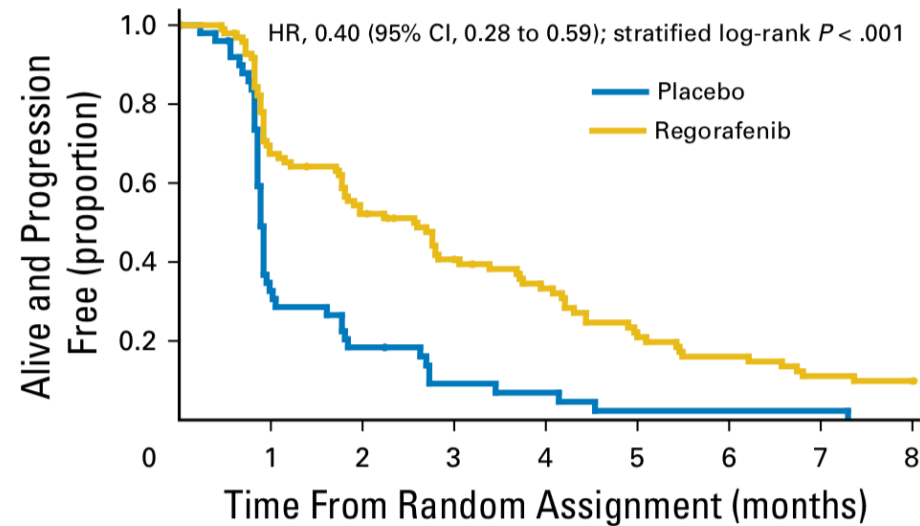
Wilhelm SM, et al. *Int J Cancer*. 2011;129:245-255. Mross K, et al. *Clin Cancer Res*. 2012;8:2658-2667. Strumberg D, et al. *Br J Cancer*. 2012;106:1722-1727.

INTEGRATE STUDY

VOLUME 34 · NUMBER 23 · AUGUST 10, 2016

JOURNAL OF CLINICAL ONCOLOGY

ORIGINAL REPORT



No. at risk		0	1	2	3	4	5	6	7	8
Placebo	50	16	9	4	3	1	1	1	1	0
Regorafenib	97	63	48	34	27	17	13	9	8	

Regorafenib for the Treatment of Advanced Gastric Cancer (INTEGRATE): A Multinational Placebo-Controlled Phase II Trial

Nick Pavlakis, Katrin M. Sjoquist, Andrew J. Martin, Eric Tsobanis, Sonia Yip, Yoon-Koo Kang, Yung-Jue Bang, Thierry Alcindor, Christopher J. O'Callaghan, Margot J. Burnell, Niall C. Tebbutt, Sun Young Rha, Jeeyun Lee, Jae-Yong Cho, Lara R. Lipton, Mark Wong, Andrew Strickland, Jin Won Kim, John R. Zalberg, John Simes, and David Goldstein

Treatment	No.	PFS (weeks)	HR
Regorafenib	97	11.1	0.41 (95%CI 0.28-0.59) $p < 0.0001$
Placebo	50	3.9	

Pavlakis et al, JCO 2016

INTEGRATE II STUDY - ONGOING

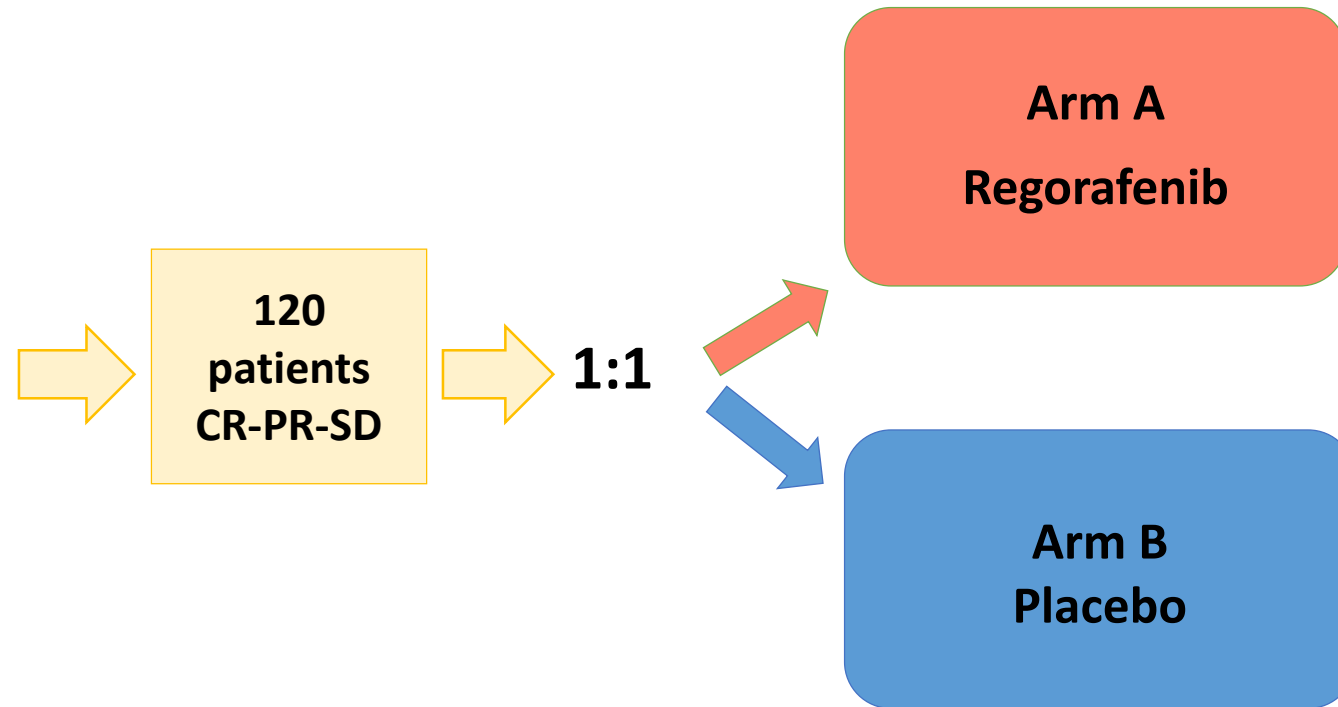
- A Randomised (2:1) Phase III Double-Blind Placebo-Controlled Study of Regorafenib in Refractory Advanced Gastro-Oesophageal Cancer (AGOC)- NCT02773524

Recruitment Status ^{ICMJE}	Recruiting
Estimated Enrollment ^{ICMJE} (submitted: May 12, 2016)	350
Estimated Study Completion Date ^{ICMJE}	December 2021
Estimated Primary Completion Date	May 2020 (Final data collection date for primary outcome measure)

clinicaltrials.gov

a-MANTRA: Randomized Phase II Study, double-blind, placebo-controlled

- Advanced gastric or GEJ cancer HER-2 negative
- 1 line with doublet chemotherapy with platinum compounds and fluoropyrimidines:
 1. DDP-5FU/cape (up to 6 cycles)
 2. FOLFOX (up to 12 cycles)
 3. XELOX (up to 8 cycles)



PRIMARY endpoints

- PFS (HR 0.57; from 4 to 7 months)

a-MANTRA: STUDY DESIGN

- The patients after a maximum of 4 weeks after the last cycle of chemotherapy will be randomized (1:1) between:
 - **Arm A 60 patients: Regorafenib 160 mg (4 tablets), given once daily, on a 3-weeks-on/1-week-off dosing schedule**
 - **Arm B 60 patients: Placebo (4 tablets, matching regorafenib tablets in appearance), given on the same schedule**
- The treatment in both arms will perform until intolerance or progression disease



a-MANTRA: STRATIFICATION

- Esophageal-gastric junction vs. distal stomach
- Intestinal subtype vs diffuse subtype
- Locally advanced disease vs metastatic disease
- Peritoneal carcinomatosis vs no peritoneal carcinomatosis

a-MANTRA: STATISTICAL ANALYSIS

- A 1:1 randomization scheme will be used.
- 90% power to detect a HR of 0.57, using a one-sided α -level of 0.10. This corresponds to an increase in median progression free survival **from 4 to 7 months**.
- 118 evaluable enrolled patients and 88 events (progression disease or deaths) occur.
- 120 patients are therefore needed for taking account of possible attrition.
- Recruitment: 24 months

a-MANTRA: MAIN CRITERIA INCLUSION

- Male or female ≥ 18 years of age
- Diagnosis of histologically confirmed adenocarcinoma of the stomach or gastroesophageal junction
- Locally advanced/metastatic gastric or gastroesophageal junction cancer
- HER2 negative gastric or gastroesophageal junction cancer (ICH 0, IHC 1+, IHC + FISH -)
- Have an Eastern Cooperative Oncology Group performance status of 0 or 1 within 14 days prior to the initiation of study treatment
- CR/PR/SD after first-line platinum compound and fluoropyrimidines based chemotherapy
- Measurable disease according to RECIST 1.1 criteria
- Have adequate bone marrow function, liver function, and renal function.

a-MANTRA: MAIN CRITERIA EXCLUSION

- Prior treatment with regorafenib or any other VEGFR-targeting kinase inhibitor
- Prior or concurrent cancer distinct in primary site or histology from *GC or GJC* within 5 years prior to randomization EXCEPT for curatively treated cervical cancer in situ, no-melanoma skin cancer, or superficial bladder tumors classified as noninvasive tumor, carcinoma in situ, or tumor invades lamina propria.

a-MANTRA: OBJECTIVES OF STUDY

- **PRIMARY ENDPOINT:**

- **Progression Free Survival 1 (PFS1)**

- **SECONDARY ENDPOINTS:**

- Overall Survival (OS)
- PFS2 in patients submitted to second line of therapy
- Safety and tolerability of regorafenib
- Quality of life (EORTC QLQ-C30)
- Response Rate (RR)
- To correlate the genetic mutational profile of the tumors with the RR and the OS

a-MANTRA: COLLATERAL STUDY (optional)

- Tumor tissue analysis:
 - Positivity to EBV by using In Situ Hybridization (ISH)
 - Levels of MSI will be analyzed by Immunohistochemistry (IHC)
 - Analysis of mutations by targeted NGS
- Evaluation of serum biomarkers (e-NOS) (days 1, week 8, 16, 24, 32). Germline DNA will be extracted from a blood sample collected to screen patients for eNOS c.-786C>T and c.894G>T variants by Real Time PCR and automatic sequencing respectively



PARTECIPATING CENTERS:

1	REGGIO EMILIA	PINTO
2	ALESSANDRIA	BELLOTTI
3	TRENTO	TRENTIN
4	BOLZANO	VICI
5	VIMERCATE	FAGNANI
6	UDINE	CIARFELLINO
7	VERONA	GORI
8	BOLOGNA (BELLARIA)	BRANDES
9	PARMA	LEONARDI
10	FERRARA	FRASSOLADATI
11	MELDOLA	FRASSINETI
12	BOLOGNA (S. ORSOLA)	DI FABIO
13	RIMINI	CARMINATI
14	PISA	LEONCINI
15	GROSSETO	BENGALA
16	ANCONA	BERARDI
17	PESARO	CATALANO
18	FANO	MATTIOLI

19	PERUGIA	DE ANGELIS
20	FROSINONE	GAMUCCI
21	ROMA - GEMELLI	STRIPPOLI
22	ROMA I.F.O.	COGNETTI
23	NAPOLI (UNIVERSITA')	DE VITA
24	NAPOLI (PASCALE)	CASARETTI
25	POTENZA	BILANCIA
26	RIONERO IN VULTURE	AIETA
27	BARI	SILVESTRIS
28	SAN GIOVANNI ROTONDO (FG)	MAIELLO
29	BRINDISI	CINIERI
30	FOGGIA	BISCEGLIE
31	CATANIA	BORDONARO

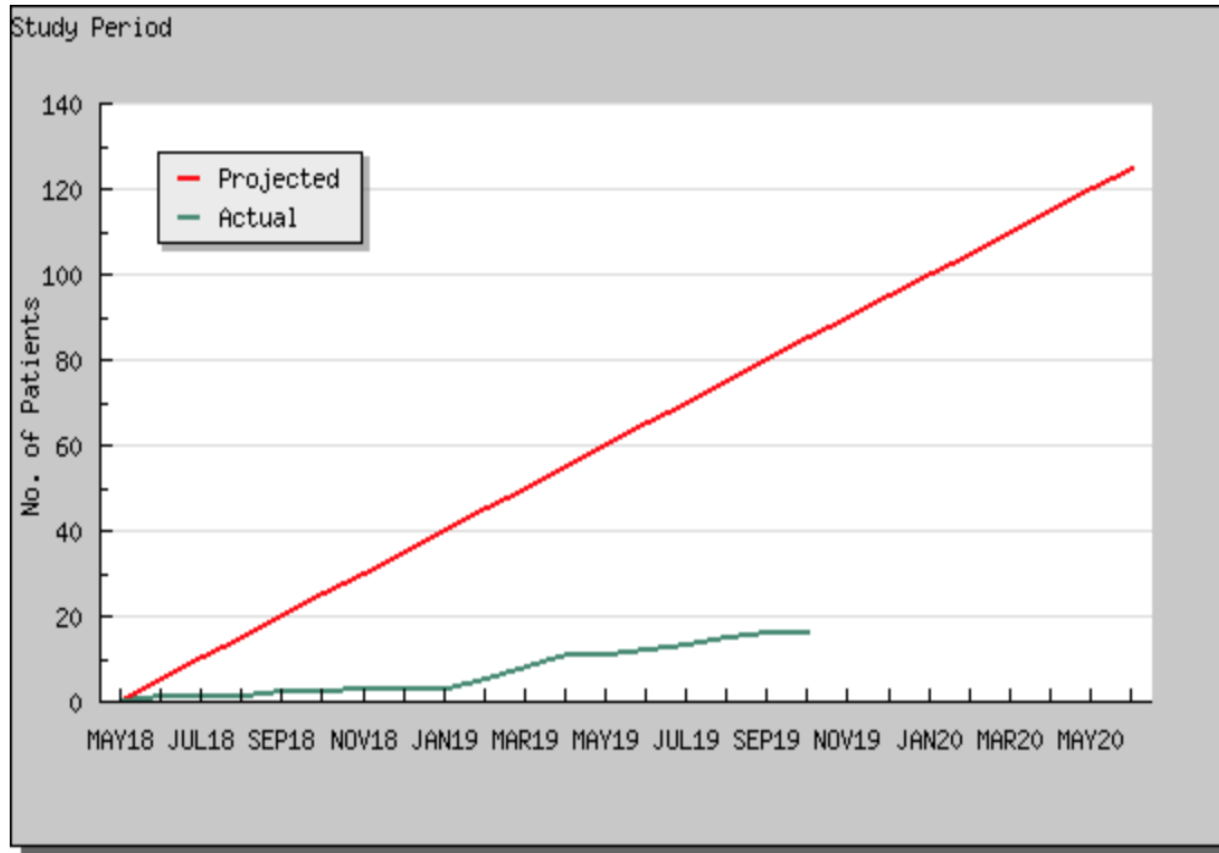
STUDY ACCRUAL SUMMARY

SEPTEMBER, 30 2019

Status	Open	
Opening date	13-JUN-2018	
Closing date	12-JUN-2020	
Accrual duration	731 days	476 days
Number of enrolled patients	120	16
Overall accrual rate	5.0 pts/month	1.0 pts/month
Accrual rate during last three months	1.4 pts/month	

 PROJECTED  ACTUAL

MONTHLY ACCRUAL REPORT – SEPTEMBER 2019



- ✓ TOTAL ACCRUAL SEPTEMBER: 1
- ✓ TOTAL CENTRES: 9

Highest total accrual

POTENZA [BILANCIA]: 4

ROMA GEMELLI [STRIPPOLI] : 2

REGGIO EMILIA [PINTO]: 2

RIONERO VULTURE [AIETA] : 2

ALESSANDRIA [BELLOTTI] : 2

Highest accrual this month

ALESSANDRIA [BELLOTTI] : 1

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