FPN: 1200TiP

Phase Ia/Ib study of RS-0139, a novel tumor-targeted delivery of docetaxel, in patients with recurrent, locally advanced, or metastatic non-small cell lung cancer (NSCLC)

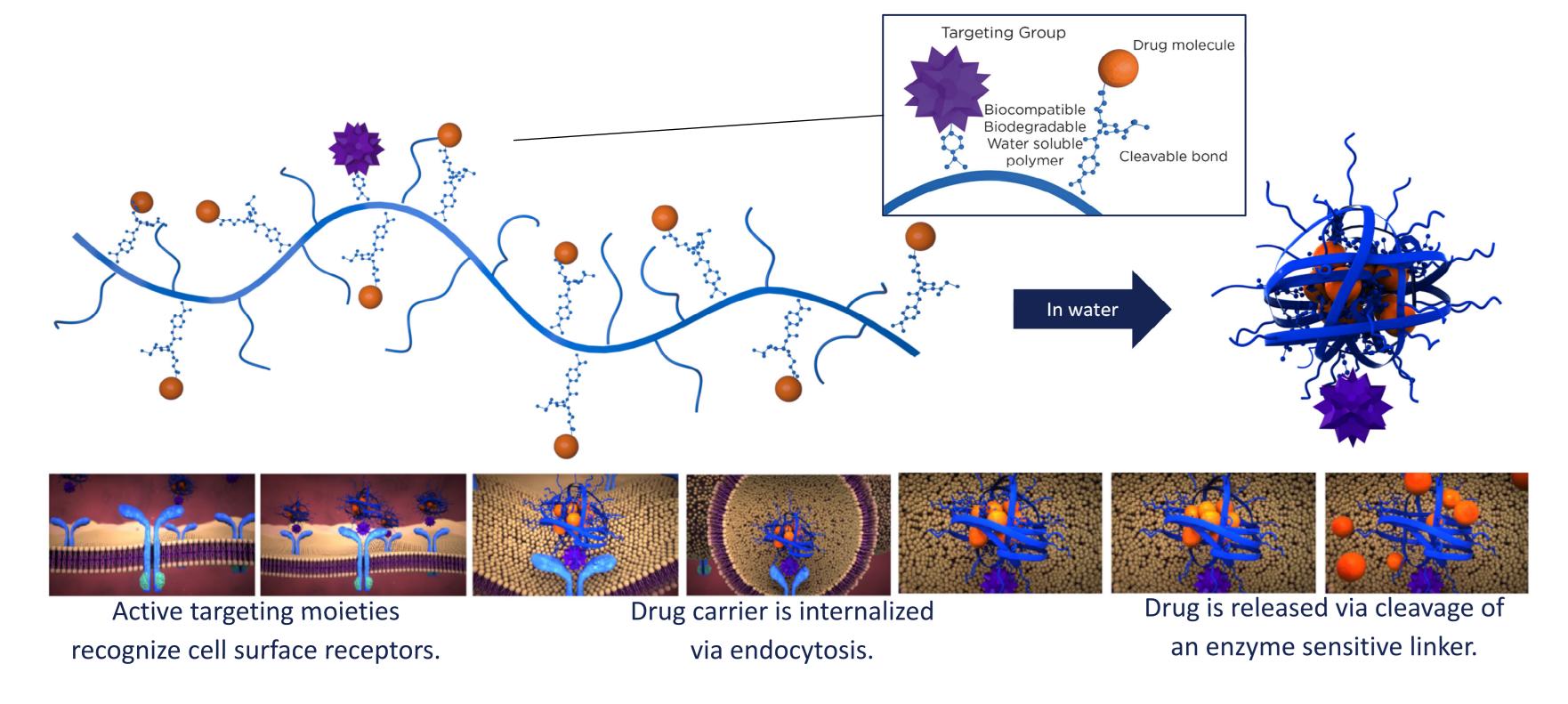


H. S. Orer¹, G. Nomak², B. Oksuzoglu³, R. Senturk³, Y. Eralp⁴, F. Yumuk⁵, S. Nomak⁶, R. Sanyal²

¹Dept. Medical Pharmacology, Koc University School of Medicine, Istanbul, TR, ²RS Research Inc, Istanbul, TR, ³Dr. Abdurrahman Yurtaslan Ankara Oncology Training and Research Hospital, Ankara, TR, ⁴Acibadem University School of Medicine, Istanbul, TR, ⁵Vehbi Koc American Hospital, Istanbul, TR, ⁶PDC Therapeutics SA, Lausanne, CH

BACKGROUND

- Docetaxel (DTX) is an anti-microtubule agent registered for multiple indications and is usually administered 3-weekly (Q3W) at doses ranging from 60 to 100 mg/m².
- Important limitations of include docetaxel acute hypersensitivity reactions, neutropenia, neuropathy, fatigue, nausea, vomiting, and nail toxicity.
- RS-0139 was developed as a DTX-releasing, tumor-targeted prodrug. The active molecule (DTX) is covalently bound to a polymer backbone, together with a targeting peptide, which shows a high affinity to $\alpha_v \beta_3$, $\alpha_v \beta_5$, and $\alpha_v \beta_6$ integrin receptors highly expressed on the tumor cell surface. Once RS-0139 is uptaken by the cell, the covalent bond is cleaved to release DTX in the cytoplasm.

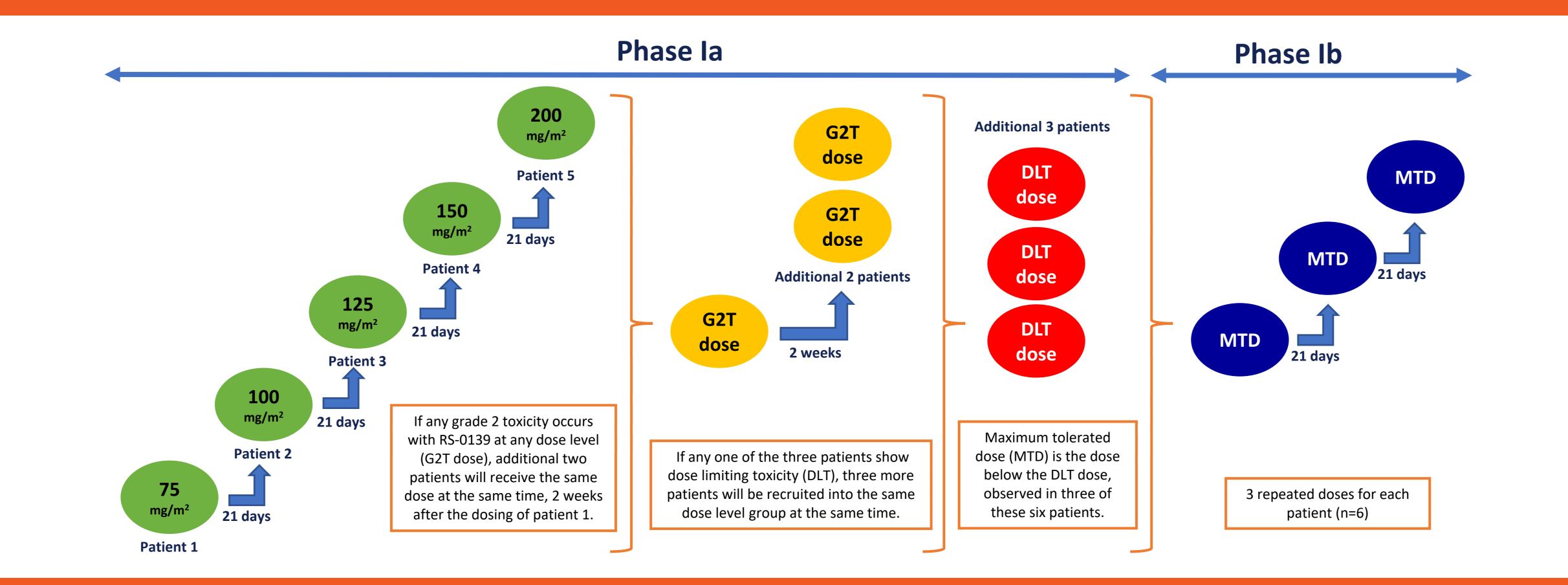


 In preclinical studies, the enzymatically cleavable covalent conjugation of DTX enabled sustained release inside the tumor, reducing adverse effects due to limited circulating free DTX. Hence, RS-0139 showed superior tolerability to DTX in healthy mice, rats, and rabbits. Besides, the dosing frequency decreased owing to the increased half-life, which is related to the release rate from the carrier platform. Preclinical data strongly support the clinical translation of this novel nanomedicine to treat solid tumors.

METHODS

- This is a Phase Ia/Ib open-label, multicenter, dose-escalation, and expansion study to evaluate the safety and tolerability of RS-0139 monotherapy in non-small cell lung cancer (NSCLC).
- To determine the maximum tolerated dose, a dose-escalation protocol consisting of an accelerated titration design was developed. Each step will increase until the recommended phase Ib dose is reached. In case of grade 2 toxicity, the protocol will be switched to the standard 3+3 design.
- Phase Ib will be initiated following the decision of the recommended dose for RS-0139 upon evaluating all available safety and pharmacokinetic (PK) data, and 6 more participants will receive 3 cycles every 21 days.
- All protocols and procedures are approved by and conducted under the supervision of Koc University Ethics Committee for Clinical Trials (2020.360.IRB1.142).

STUDY DESIGN



OBJECTIVES

• The primary objective of this study is to determine the maximum tolerated dose of RS-0139 monotherapy in recurrent, locally advanced or metastatic NSCLC patients who are not responding to existing treatments.

Secondary Objectives:

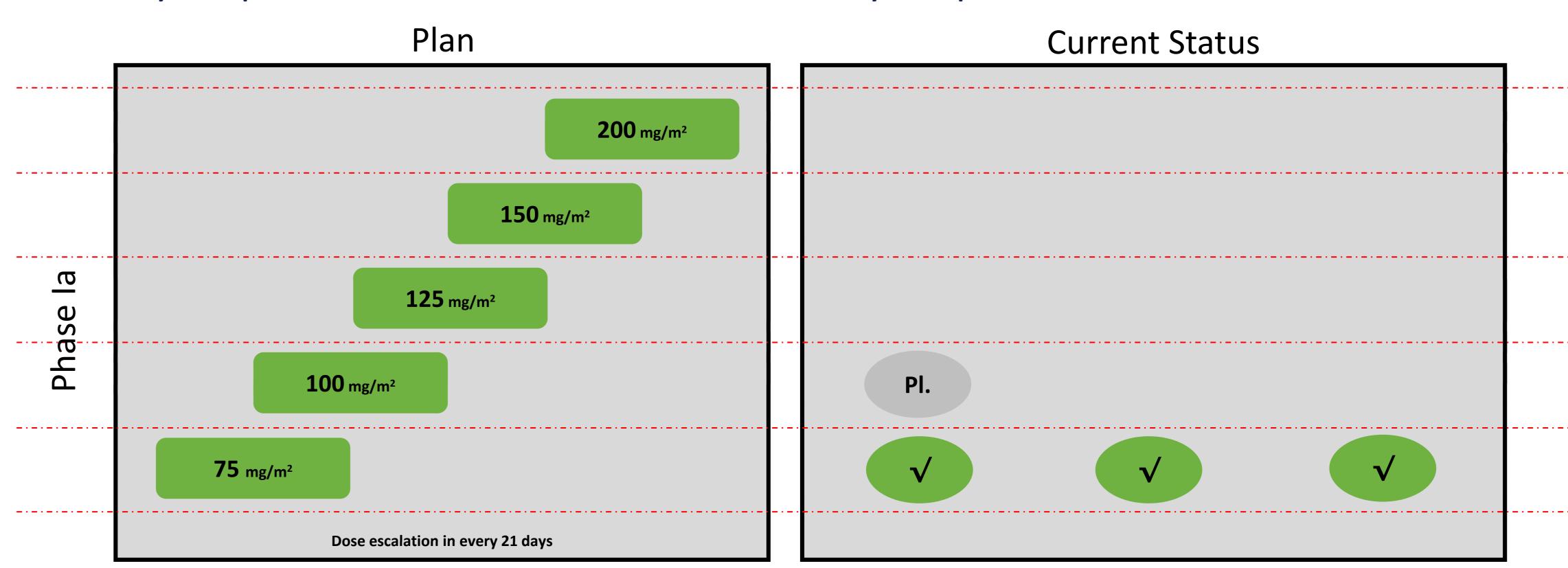
- To assess the safety and tolerability of the study drug
- To assess the pharmacokinetics and the toxicity of the study drug

KEY ELIGIBILITY CRITERIA

- Patients of both sexes aged between 18 and 75 years.
- Patients with stage IIIB or IV NSCLC and measurable disease by Response Evaluation Criteria in Solid Tumors and availability of at least one measurable tumor focus under RECIST v.1.1 criteria.
- Patients with NSCLC progressed after standard therapy options consisting of chemotherapy and/or immunotherapy.
- Patients who completed the previous treatments 21 days before the first dose of the study drug.
- Patients who have at least three months of life expectancy.
- Patients with ECOG performance score 0-1.
- Patients who have earlier biopsy material confirming the expression of integrin ανβ6 (Phase Ib only).

CURRENT STATUS

• The study is open for enrollment in 2 sites in Turkey. 16 patients will be enrolled in total.



- This trial is registered under the NCT Number: NCT04261413
- This study received funding from TUBITAK-SADE 3189325
- The presenter has no conflicts of interest to declare

Contact:

Gulsah Nomak: gn@rsresearch.net

Hakan Sedat Orer: horer@ku.edu.tr



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