Safety Analysis by UGT1A1 Status of TROPHY-U-01 Cohort 1, a Phase 2 Study of Sacituzumab Govitecan (SG) in Patients (pts) With Metastatic Urothelial Cancer (mUC) Who Progressed After Platinum (PT)-Based Chemotherapy and a Checkpoint Inhibitor (CPI)

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Key Findings

- The safety profile of SG is manageable, with _____ **low discontinuation rates (7%)**
- Among TRAEs of any grade, the most _____ common were diarrhea, nausea, and fatigue both in the overall population of patients and those homozygous for the wild-type allele
- The most frequent TRAEs in patients _____ heterozygous and homozygous, respectively, for the UGT1A1*28 allele were diarrhea, fatigue, and neutropenia; and nausea, diarrhea, and alopecia
- The frequency of dose reductions or _____ interruptions of SG, and the type and grade of AEs, depended on UGT1A1 status

Conclusions



With longer follow-up, safety data were consistent with the known SG safety profile



AE incidence varied across UGT1A1 subgroups, with numerically higher dose interruptions observed in patients homozygous for the UGT1A1*28 allele



Sample sizes in this study were small; other cohorts of the TROPHY-U-01 and TROPiCS-04 trials in patients with mUC, as well as breast cancer trials, will further inform the impact of UGT1A1 status on safety outcomes with SG and subsequent management strategies

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Background

Metastatic urothelial carcinoma

- The prognosis for patients with metastatic urothelial carcinoma (mUC) is poor, with an average 5-year survival < 10% for patients in the United States¹
- Patients with locally advanced or mUC who progressed on or after platinum-based and checkpoint inhibitor (CPI) therapies have limited treatment options,^{2,3} and additional safe and effective therapies are needed

Sacituzumab govitecan (SG)

- SG is a novel antibody-drug conjugate composed of an antibody targeting the human trophoblast cell-surface antigen 2 (Trop-2) coupled to cytotoxic SN-38 payload via a hydrolyzable linker⁴⁻⁷
- SG was granted FDA accelerated approval in the US for the treatment of patients with locally advanced or mUC who previously received PT-based chemotherapy and a CPI⁸
- In an updated efficacy analysis of the pivotal TROPHY-U-01 Cohort 1 study of 113 patients, SG demonstrated an objective response rate (ORR) of 28%, a median overall survival (OS) of 10.9 months, and a manageable safety profile after median follow-up of 10.5 months⁹
- A confirmatory randomized phase 3 trial, TROPiCS-04, is ongoing (NCT04527991)

UGT1A1 gene polymorphism

- SN-38, the cytotoxic payload in SG, is inactivated by uridine diphosphate glucuronosyltransferase 1A1 (*UGT1A1*) into SN-38G, which is excreted with bile¹⁰

 Mutations in the UGT1A1 gene, including the UGT1A1*28 and UGT1A1*6 polymorphisms, have been reported to be associated with toxicities in patients treated with SN-38-based chemotherapy; therefore, patients homozygous for the UGT1A1*28 allele may be at an increased risk for adverse events (AEs)

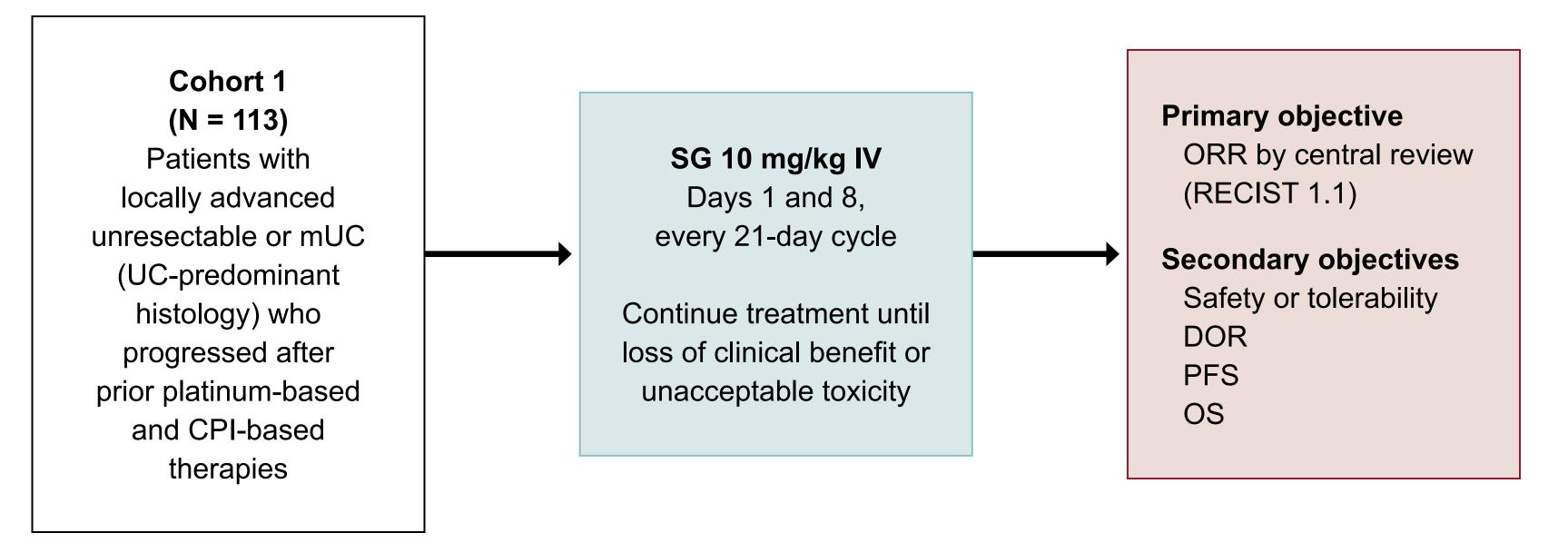
Objective

Here, we report updated safety outcomes from the overall Cohort 1 of TROPHY-U-01 and by UGT1A1 status

Methods

- TROPHY-U-01 is an international, multicohort, open-label, phase 2 study of SG in patients with unresectable locally advanced or mUC:
- Patients in Cohort 1 of the TROPHY-U-01 study were aged \geq 18 years with an Eastern Cooperative Oncology Group performance status (ECOG PS) of 0 to 1
- The patient population, study drug dose, and objectives for Cohort 1 are presented in Figure 1
- All patients who received \geq 1 dose of SG were included in the evaluation of safety — The frequency and severity of AEs were classified using Medical Directory for Regulatory Activities (MedDRA) Version 22 or greater
- Post hoc safety analyses were exploratory with descriptive statistics provided

Figure 1. TROPHY-U-01 Cohort 1 study design



CPI, checkpoint inhibitor; DOR, duration of response; mUC, metastatic urothelial cancer; ORR, objective response rate; OS, overall survival; PFS, progression-free survival; RECIST 1.1, Response Evaluation Criteria in Solid Tumors, version 1.1; SG, sacituzumab govitecan. ClinicalTrials.gov identifier: NCT03547973; IMMU-132-06 study.

Results

Patients

As of July 26, 2022, the median follow-up was extended to 10.5 months (range, 0.3-40.9 months) for a total of 113 patients treated in Cohort 1; patient baseline characteristics are presented in Table 1

Table 1. Demographics and baseline characteristics

	Cohort 1 (N = 113)	Table 4. Summary of AES by UGITAT status			
Median age at study entry, y (range)	66 (33-90)		UGT1A1 status		
Sex, n (%)			WT	Heterozygous	Homozygous
Female	25 (22)	n (%)	*1 *1 (n = 45)	*1 *28 (n = 47)	*28 *28 (n = 14)
Male	88 (78)				
ECOG performance status, n (%)		Any AEs	44 (98)	46 (98)	14 (100)
0	32 (28)	AEs grade ≥ 3	40 (89)	34 (72)	14 (100)
1	81 (72)	Serious AEs	23 (51)	17 (36)	10 (71)
UGT1A1 status, n (%)		Deaths	2 (4)	1 (2)	0 (0)
Wild-type *1 *1	45 (40)	Any TRAEs	42 (93)	44 (94)	14 (100)
Heterozygous *1 *28	47 (42)	TRAEs grade ≥ 3	28 (62)	28 (60)	11 (79)
Homozygous *28 *28	14 (12)				
Missing	7 (6)	Treatment-related deaths	1 (2)	0 (0)	0 (0)
Median prior anticancer regimens, n (range)	3 (1-8)	AE, adverse event; TRAE, treatment-related AE; <i>UGT1A1</i> , uridine diphosphate	glucuronosyltransferase 1A1; WT, wild type.		
Known baseline comorbidities, n (%)					
Hypertension	59 (52)	Table 5. Summary of TRAEs of	r any grade in $220%$	or patients by L	JGTTAT status
Chronic kidney disease	14 (12)			UGT1A1 status	
Coronary artery disease	11 (10)		WT	Heterozygous	Homozygous
Diabetes mellitus II	9 (8)		*1 *1	*1 *28	*28 *28
Myocardial infarction	9 (8)	n (%)	(n = 45)	(n = 47)	(n = 14)
COG, Eastern Cooperative Oncology Group; UGT1A1, uridine diphosphate-glucuronosyltransferase 1A1.		Nausea	26 (58)	25 (53)	11 (79)

Updated safety outcomes

^aNeutropenia includes neutrophil count decreased

- Treatment-related AEs (TRAEs) of any grade occurred in 95% (n = 107) of patients
- Serious AEs were observed in 45% of patients
- 43% of patients required inpatient hospitalization or prolongation of existing hospitalization
- Consistent with prior reports, TRAEs led to SG discontinuation in 7%, dose reduction in 40%, and dose interruption in 47% of patients in the overall Cohort 1 population
- There was 1 treatment-related death due to febrile neutropenia—related sepsis in a 65-year-old male patient with mUC, stage III chronic kidney disease, and prior history of lung cancer
- No new treatment-related deaths have occurred since the previous data cut (median follow-up, 9.1 months)
- TRAEs of any grade in \geq 20% and grade \geq 3 in \geq 10% of all patients are presented in Tables 2 and 3, respectively

Table 2. Summary of TRAEs of any grade in ≥ 20% of all patients

n (%)	Cohort 1 (N = 113)
Diarrhea	73 (65)
Nausea	68 (60)
Fatigue	59 (52)
Neutropenia ^a	53 (47)
Alopecia	53 (47)
Decreased appetite	41 (36)
Anemia	38 (34)
Vomiting	34 (30)
Leukopenia	29 (26)

		UGT1A1 status		
higher in ≥ 10% of all patients		WT	Heterozygous	Homoz
Cohort 1 (N = 113)	n (%)		•	*28 (n =
39 (34)				
20 (18)		3 (7)	3 (6)	2 (*
16 (14)				
11 (10)	Dose reduction	17 (38)	16 (34)	6 (4
11 (10)	Interruption	19 (42)	20 (43)	10
	Cohort 1 (N = 113) 39 (34) 20 (18) 16 (14) 11 (10)	Cohort 1 (N = 113) n (%) 39 (34) TRAEs leading to study drug 20 (18) Discontinuation 16 (14) Dose reduction 11 (10) Let we time	Cohort 1 (N = 113) n (%) *1 *1 (n = 45) 39 (34) n (%) (n = 45) 20 (18) Discontinuation 3 (7) 16 (14) 0se reduction 17 (38) 11 (10) It (n (n = 45)) 10 (40)	higher in $\geq 10\%$ of all patientsWT *1 *1 (n = 45)Heterozygous *1 *28

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TROPHY-U-01

Safety outcomes by UGT1A1 status

- A summary of safety outcomes is presented in Table 4
- Incidence of the most frequent TRAEs is shown in Table 5

Table 4 Summary of AFs by *IIGT1A1* status

		UGT1A1 status			
n (%)	WT *1 *1 (n = 45)	Heterozygous *1 *28 (n = 47)	Homozygous *28 *28 (n = 14)		
Nausea	26 (58)	25 (53)	11 (79)		
Diarrhea	24 (53)	34 (72)	10 (71)		
Fatigue	24 (53)	27 (57)	7 (50)		
Alopecia	20 (44)	22 (47)	8 (57)		
Decreased appetite	18 (40)	16 (34)	5 (36)		
Neutropenia ^a	17 (38)	26 (55)	7 (50)		
Anemia	17 (38)	15 (32)	4 (29)		
Vomiting	16 (36)	13 (28)	2 (14)		
Leukopenia	10 (22)	11 (23)	7 (50)		
Asthenia	6 (13)	5 (11)	4 (29)		
Pruritis	4 (9)	10 (21)	1 (7)		
Abdominal pain	3 (7)	9 (19)	3 (21)		
Chills	2 (4)	6 (13)	4 (29)		
Hyponatremia	2 (4)	1 (2)	3 (21)		
Hypotension	2 (4)	5 (11)	3 (21)		
Peripheral neuropathy	1 (2)	1 (2)	4 (29)		

T1A1, uridine diphosphate glucuronosyltransferase 1A1; WT, wild type. utropenia includes neutrophil count decrease

SG drug dose adjustments

TRAEs leading to SG dose adjustments are presented in Table 6

Table 6. Summary of TRAEs leading to study drug dose adjustment by **UGT1A1** status

TRAE, treatment-related AE; UGT1A1, uridine diphosphate glucuronosyltransferase 1A1; WT, wild type.