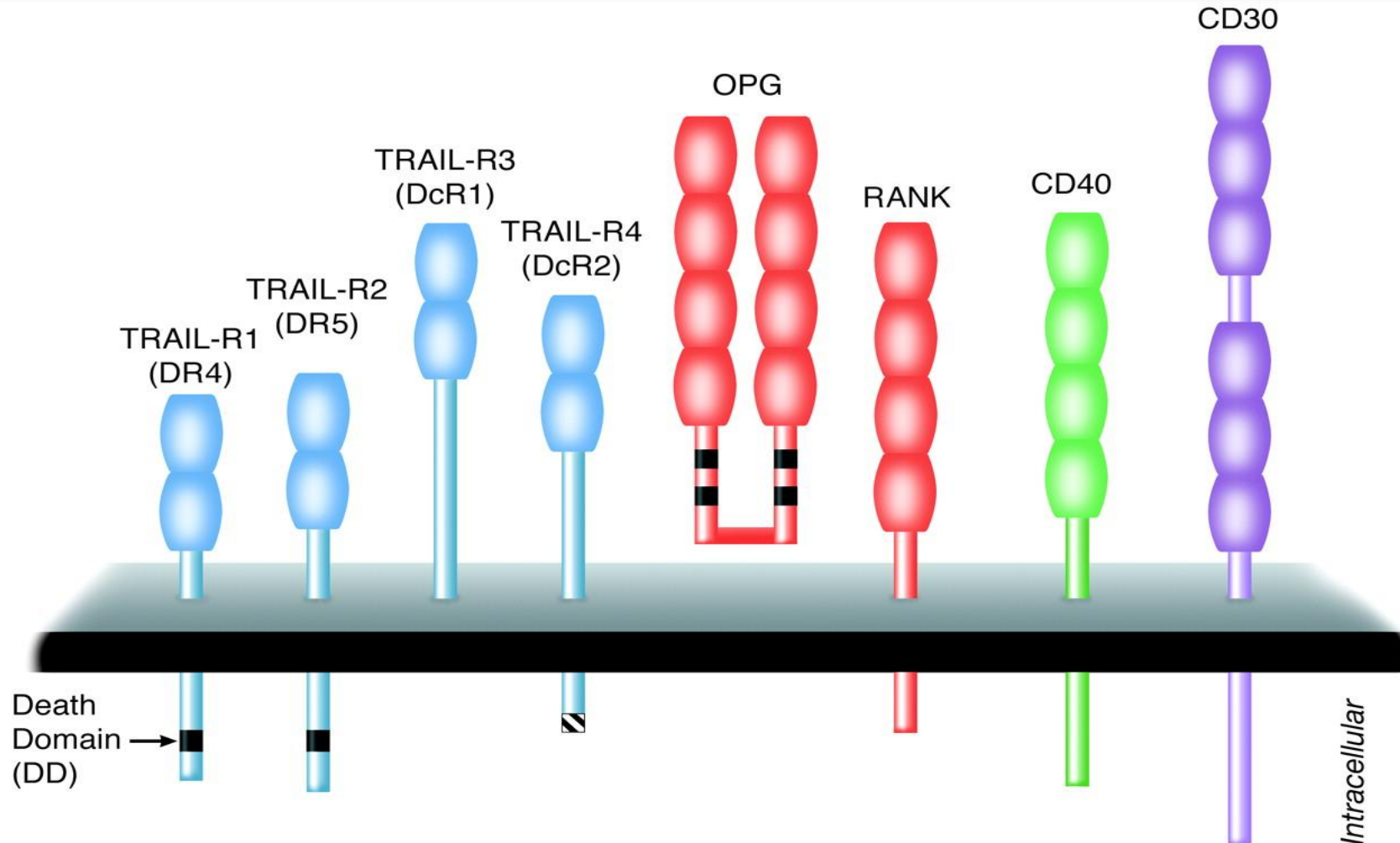


Novel treatment Approaches of advanced stage Hodgkin Lymphoma

Anas Younes, M.D.

Chief, Lymphoma Service
Memorial Sloan Kettering Cancer Center

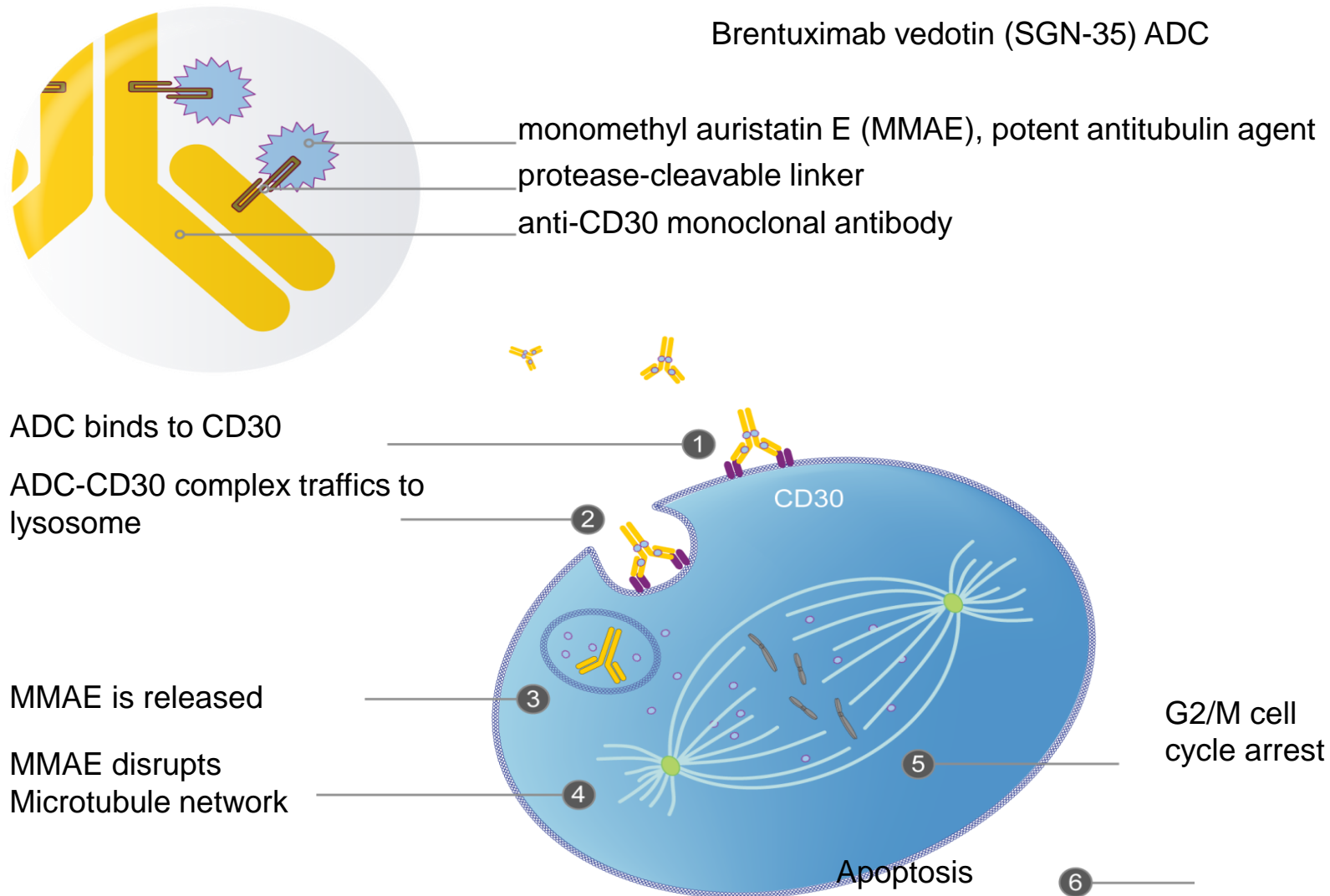
1992 (Cell): Durkop and Stein:
Molecular cloning of CD30 = TNF receptor family member



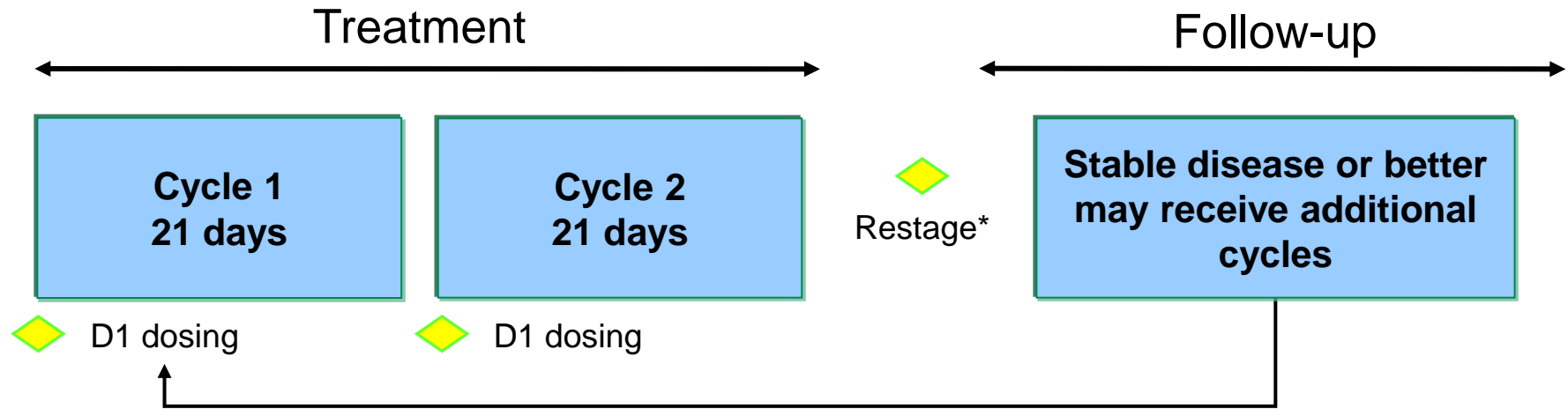
Summary results of pahse I/II clinical trials targeting CD30

Drug	Disease	Antibody type	Phase	Number of evaluable patients	PR	CR	%PR + CR
MDX-060	HL, ALCL	Humanized	I	HL = 63 ALCL = 9	2 2	2 0	6% 22%
SGN-30	HL, ALCL	Chimeric	I	24	0	0	0
SGN-30	HL, ALCL	Chimeric	II	HL = 38 ALCL = 41	0 5	0 2	0 17%
Xmab2513	HL	Humanized	I	13	1	0	7%
131I-Ki4	HL	Murine	I	22	5	1	27%

BRENTUXIMAB VEDOTIN (SGN-35) : MECHANISM OF ACTION



Phase I Brentuximab Vedotin in Relapsed HL

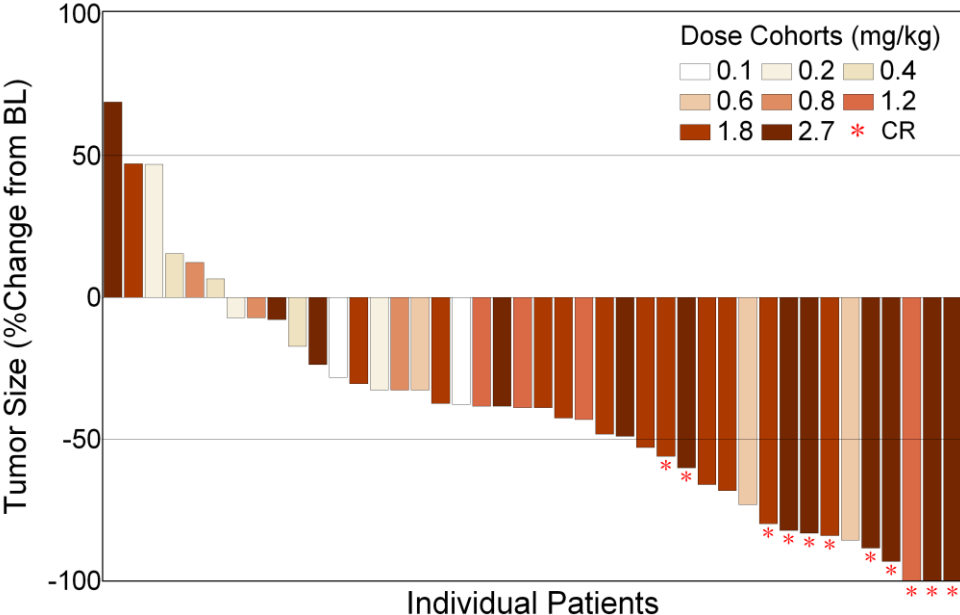


- **SGN-35 administered IV every 21 days**
- **Dose cohorts: 0.1, 0.2, 0.4, 0.6, 0.8, 1.2, 1.8, 2.7, 3.6 mg/kg**

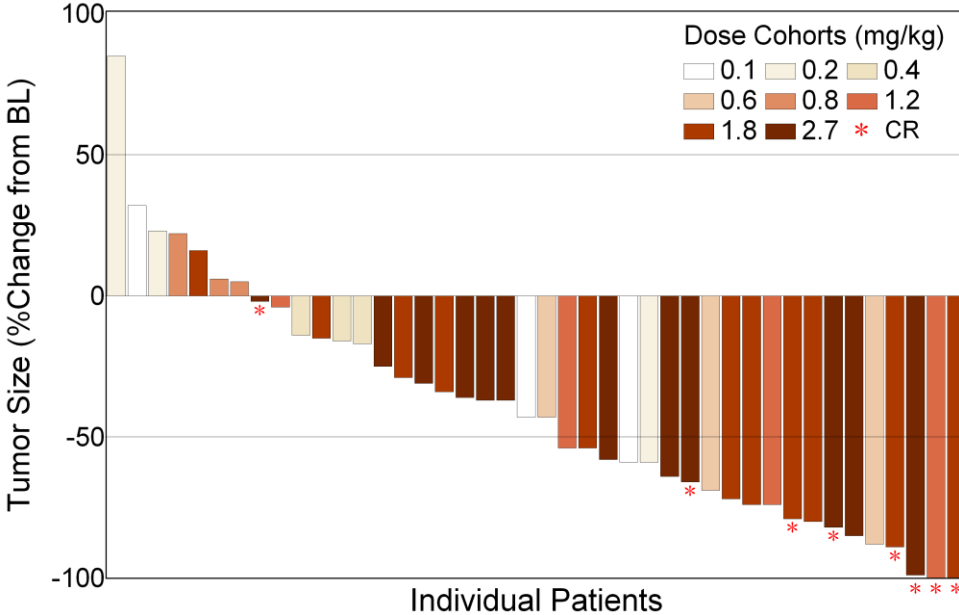
* CT and PET scans were retrospectively reviewed by an independent review facility (IRF)

Phase-I Brentuximab Vedotin in Relapsed HL: Treatment Response

Investigator Assessment

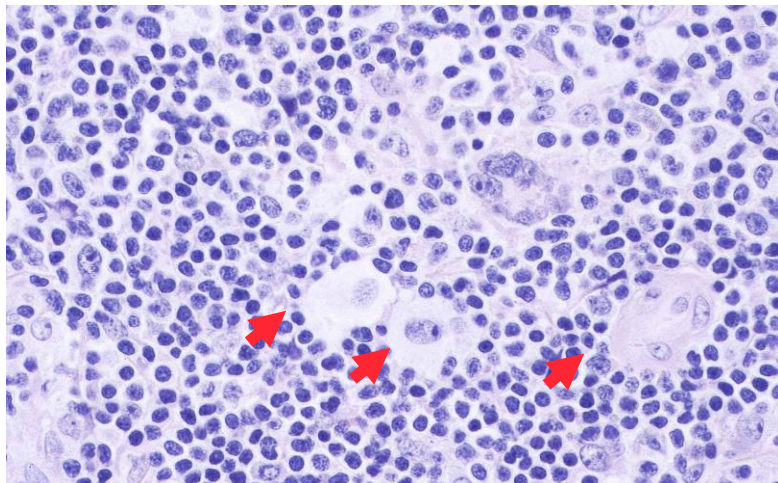


IRF Assessment



Phase I Brentuximab Vedotin in Relapsed HL

- 21-year-old female
- HL diagnosed 2003
 - ABVD + XRT to mediastinum
 - ICE
 - BEAM→ASCT
 - HDAC-inhibitor
- SGN-35 2.7 mg/kg x 8 cycles
 - Best clinical response: CR
 - CT 93% reduction, PET-
 - PET negative



Phase II Pivotal Study of Brentuximab Vedotin in Patients with R/R HL Post ASCT

Eligibility

- Relapsed or refractory CD30+ HL
- Age ≥ 12 years
- Measurable disease ≥ 1.5 cm
- ECOG performance status of 0–1
- Prior ASCT

Treatment (n=102)

- Brentuximab vedotin 1.8 mg/kg IV Q3wk
- Administered outpatient over 30 min
- Min 8 - max 16 cycles for SD or better
- Restage* at cycles 2, 4, 7, 10, 13 16

Follow-up

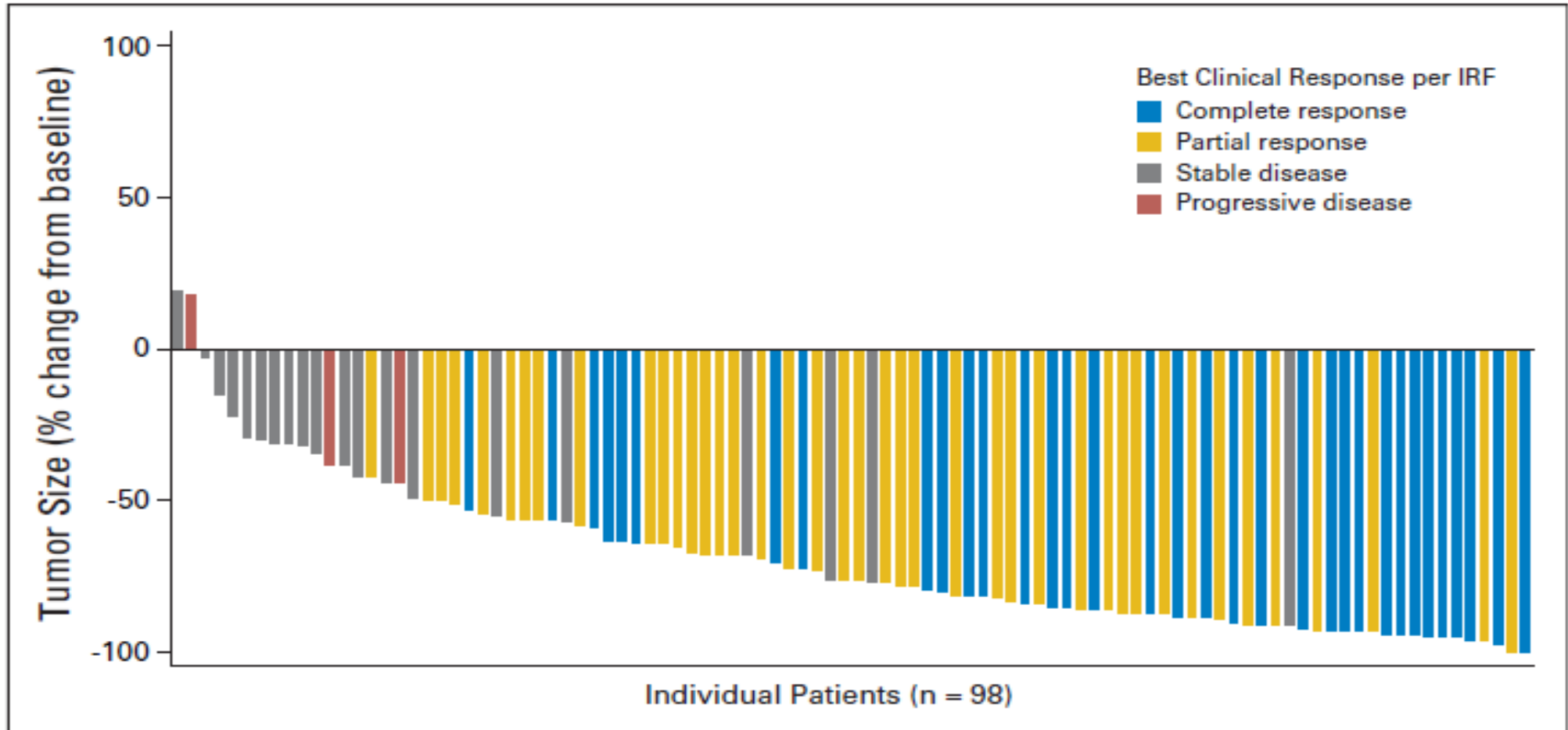
- 12 weekly for 2 years
- 6 monthly years 3–5
- Annually after 5 years

Primary Endpoint: ORR by Independent Review Facility (IRF)

*Revised response criteria for malignant lymphoma (Cheson 2007)

Phase II Pivotal Study of Brentuximab Vedotin

Maximum Reduction in Target Lesions

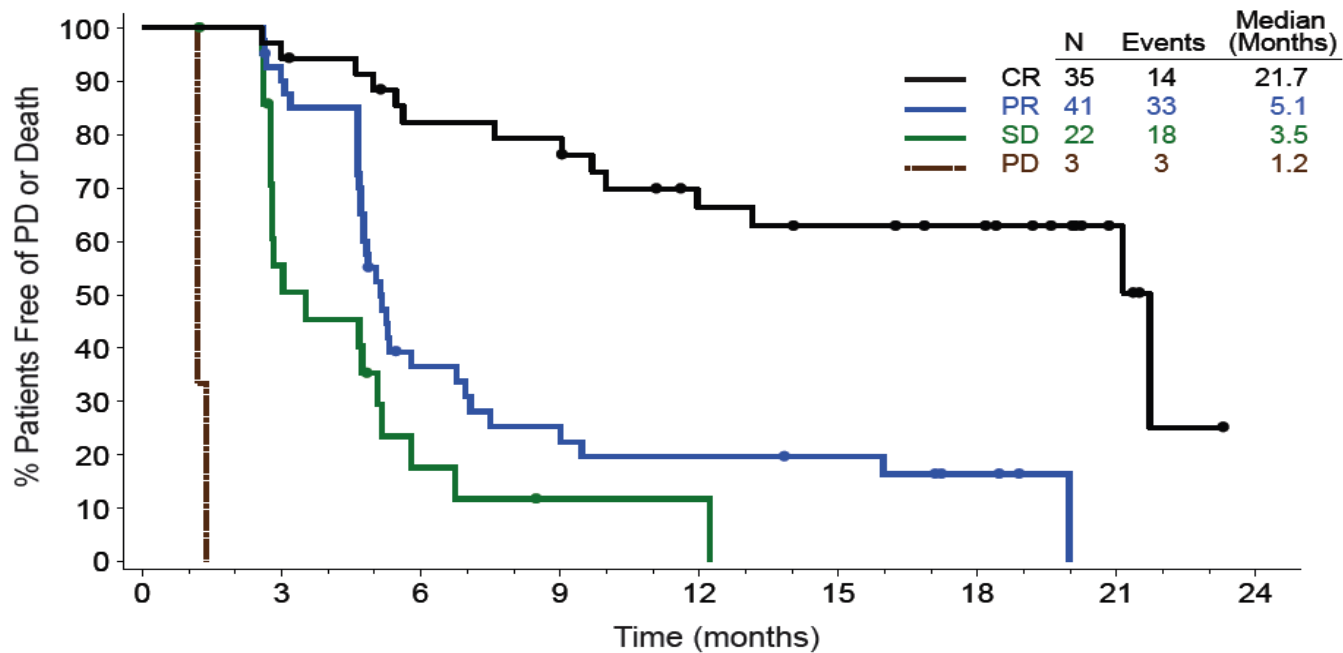


IRF – independent review facility

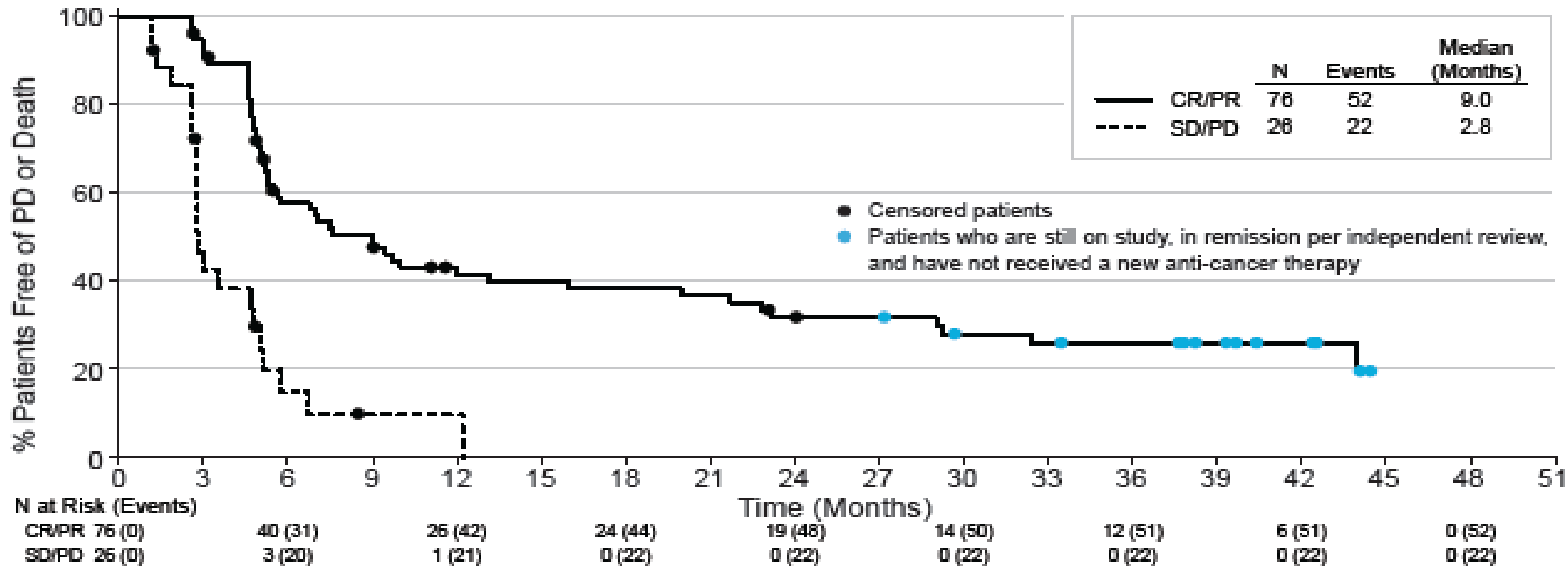
Brentuximab vedotin: pivotal Phase II trial

PFS results by best response

Phase II pivotal study of brentuximab vedotin in 102 patients with relapsed/refractory HL post ASCT: PFS by best response



Three-year Follow-up Data and Characterization of Long-Term Remissions from an Ongoing Phase 2 Study of Brentuximab Vedotin in Patients with Relapsed or Refractory Hodgkin Lymphoma

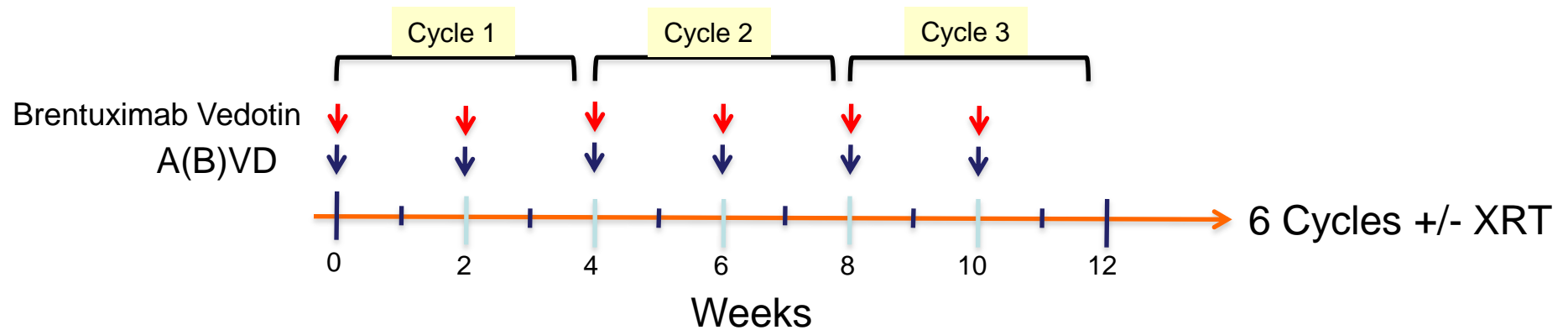


PHASE II STUDY OF BRENTUXIMAB VEDOTIN TOLERABILITY

Adverse Events in $\geq 20\%$ of Patients

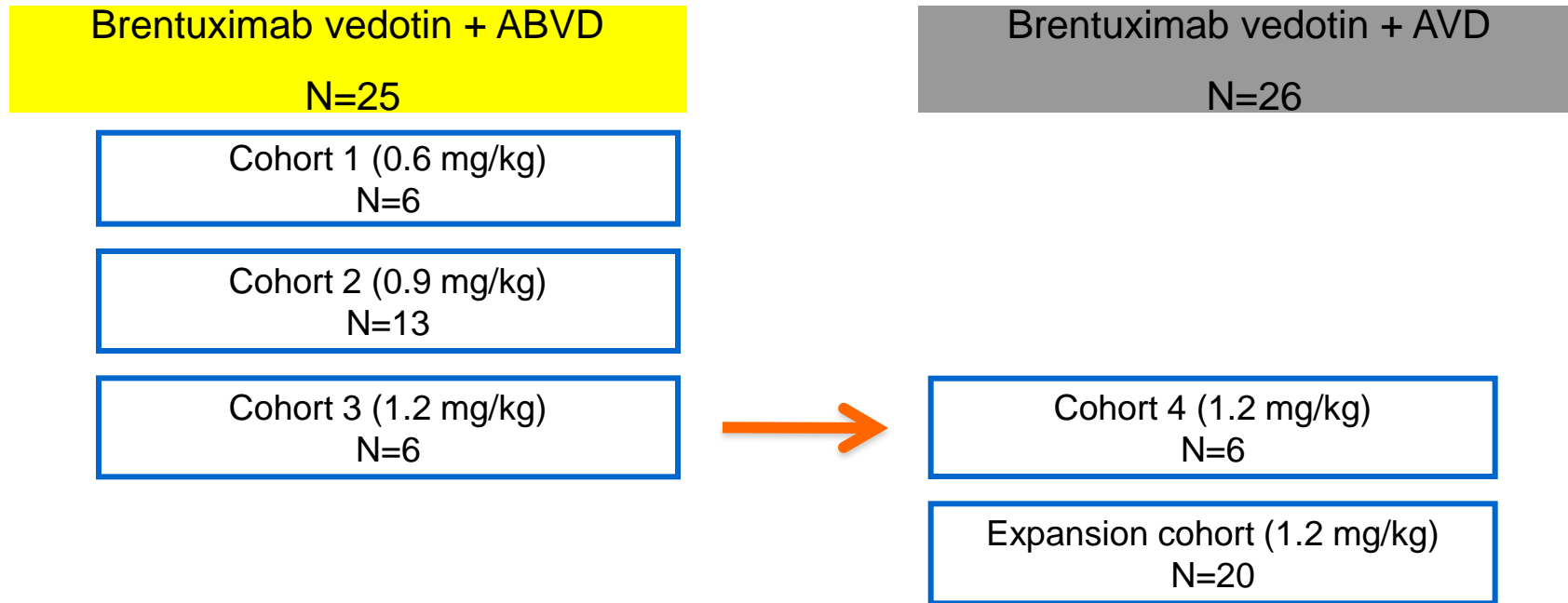
Adverse event	All Grades (%)	Grade 3 (%)	Grade 4 (%)
Peripheral sensory neuropathy	47	9	0
Fatigue	46	2	0
Nausea	42	0	0
Upper respiratory tract infection	37	0	0
Diarrhoea	36	1	0
Pyrexia	29	2	0
Neutropenia	22	14	6
Vomiting	22	0	0
Cough	21	0	0

Phase 1 ABVD/AVD + Brentuximab Vedotin



Dose-Escalation Cohorts

Patients were enrolled into 1 of 5 cohorts:



Dose-limiting toxicities were defined as any Cycle 1 toxicity requiring ≥ 7 -day delay in ABVD or AVD

Study has completed enrollment

All patients in the AVD expansion cohort are currently receiving treatment

Brentuximab Vedotin combined with ABVD vs AVD

Pulmonary Toxicity and Efficacy

	ABVD with brentuximab vedotin N=25	AVD with brentuximab vedotin N=26
Any event	11 (44)	0
Pulmonary toxicity	9 (36)	0
Interstitial lung disease	1 (4)	0
Pneumonitis	1 (4)	0
PET2 negative results	100%	92%
% CR at end of therapy	95%	96%

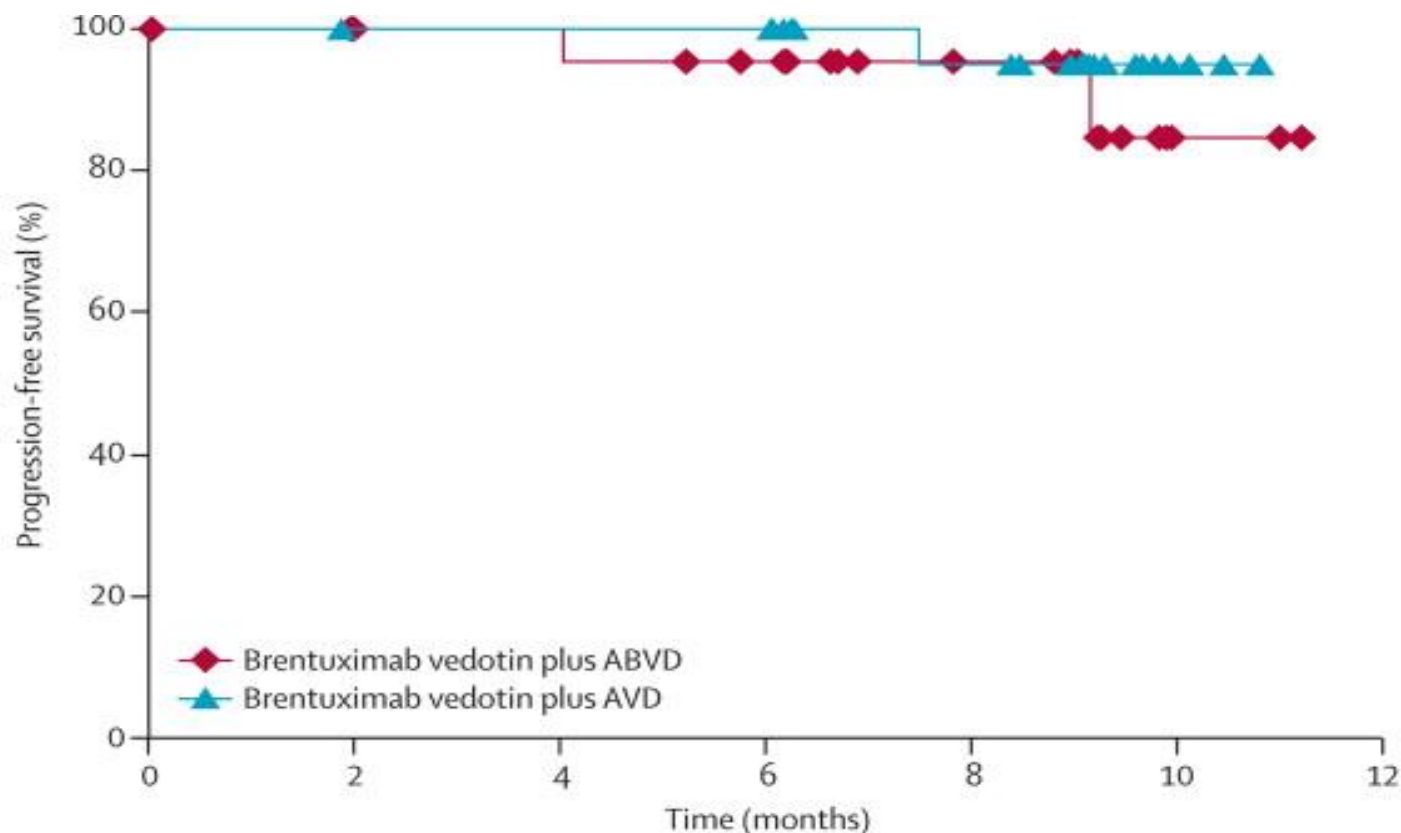
ABVD/AVD + BV

Response Results

	ABVD with brentuximab vedotin N=22 ^b	AVD with brentuximab vedotin N=26
FDG-PET Cycle 2		
PET negative, n (%)	22 (100)	24 (92)
PET positive, n (%)	0	2 (8)

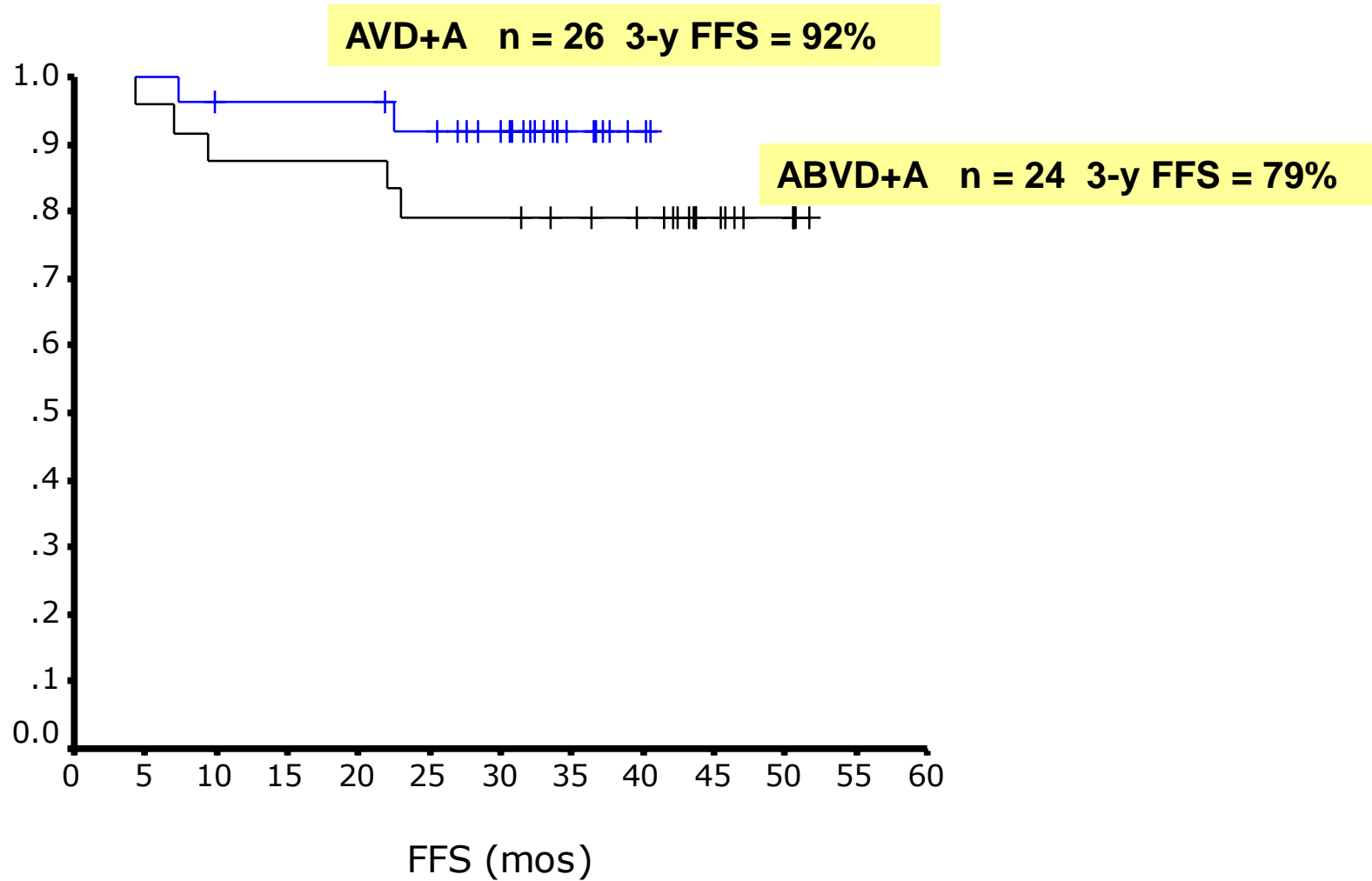
	ABVD with brentuximab vedotin N=22	AVD with brentuximab vedotin N=25
Response End of Therapy		
Response at end of frontline therapy, n (%)		
Complete remission	21 (95)	24 (96)
Progressive disease	0	1 (4)
Not evaluable due to AEs	1^b (5)	0

Phase-I Study of Brentuximab vedotin combined with ABVD or AVD for patients with newly diagnosed Hodgkin lymphoma: PFS

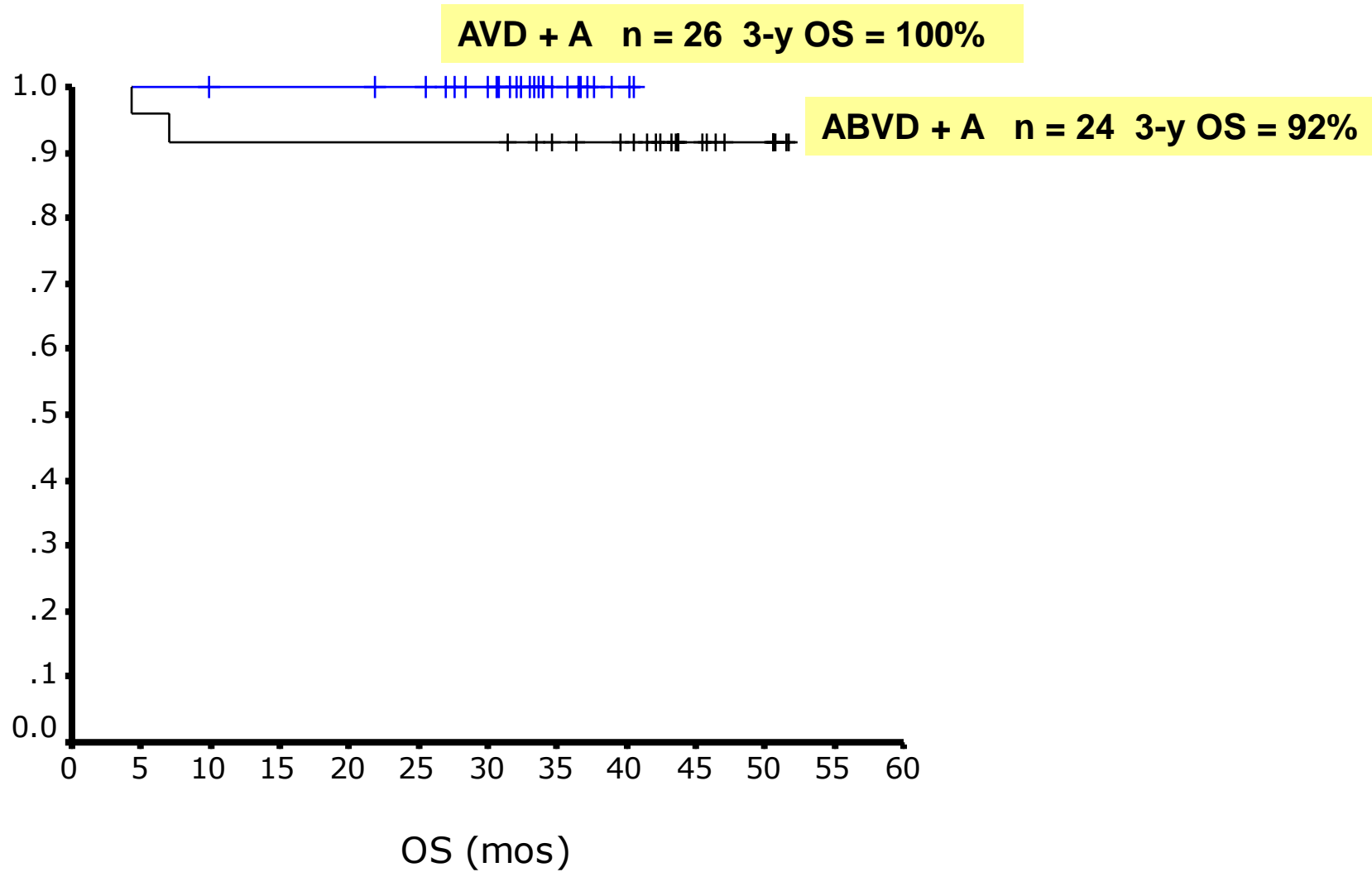


	0	2	4	6	8	10	12
Number at risk							
Brentuximab vedotin plus ABVD	25 (0)	23 (0)	22 (0)	19 (1)	13 (1)	2 (2)	0 (2)
Brentuximab vedotin plus AVD	26 (0)	25 (0)	25 (0)	25 (0)	19 (1)	3 (1)	0 (1)

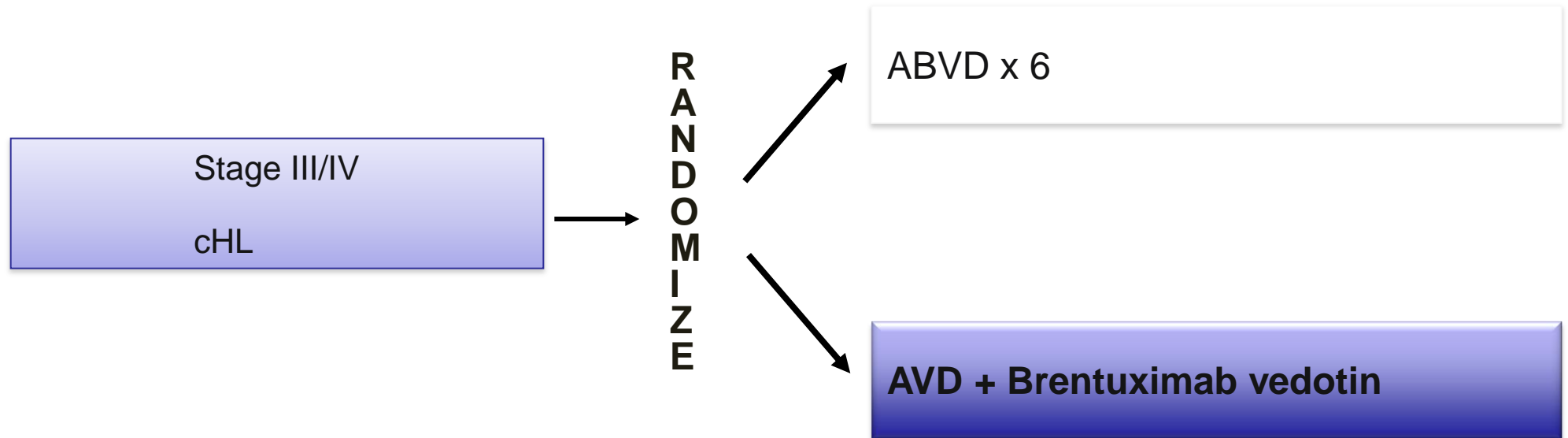
Failure Free Survival



Overall Survival

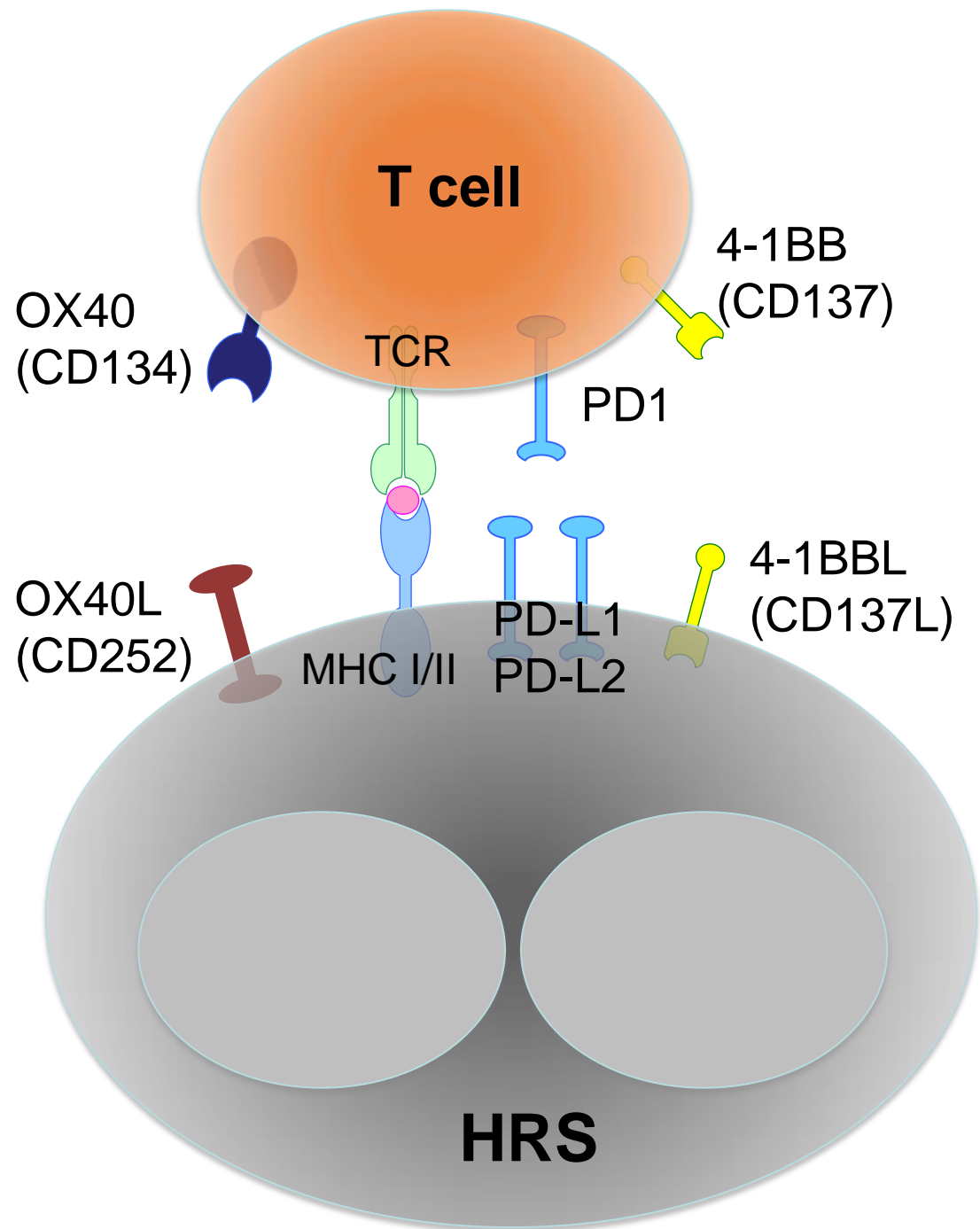


Randomized Study in Newly Diagnosed Advanced Stage HL

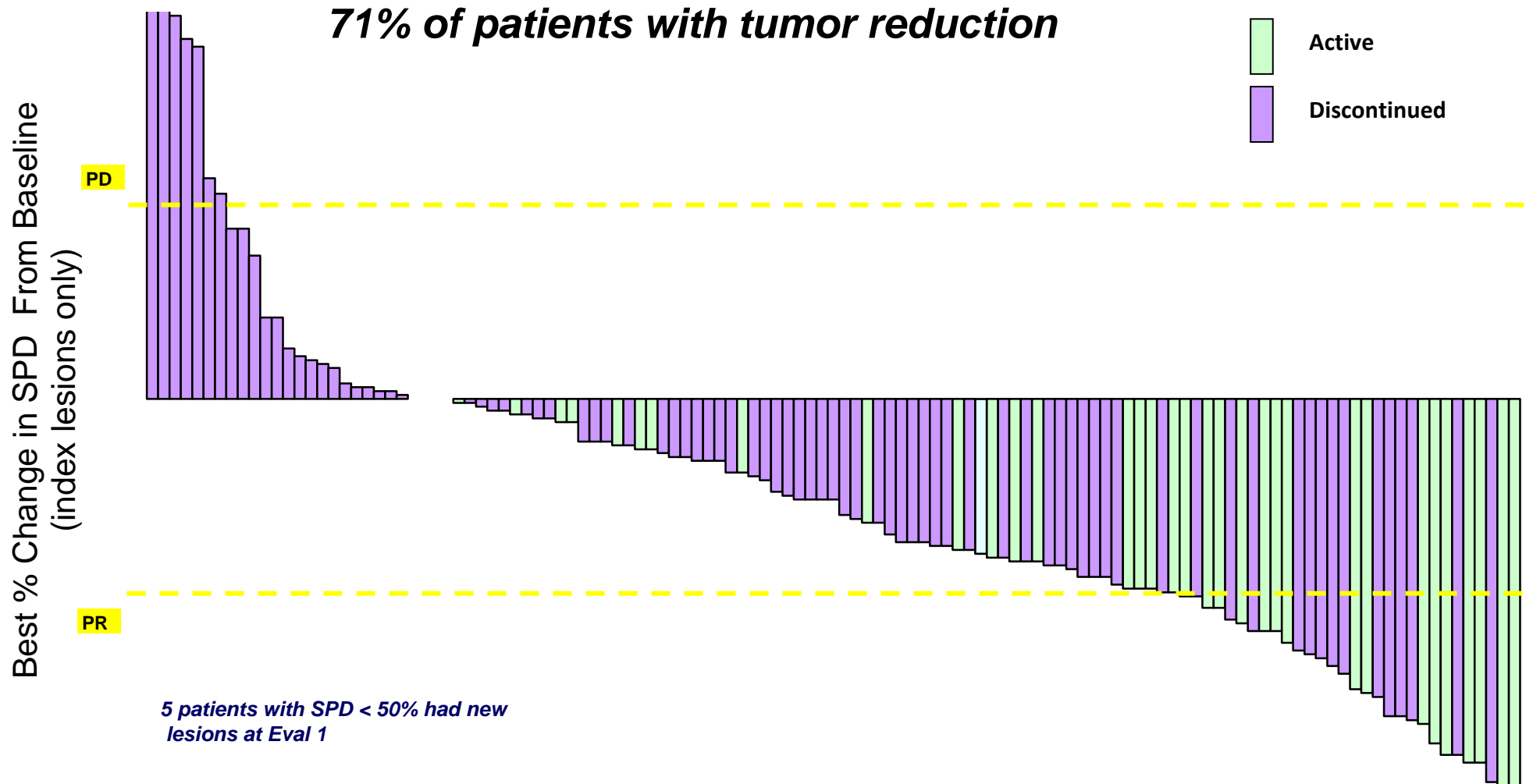


BrECADD Regimen

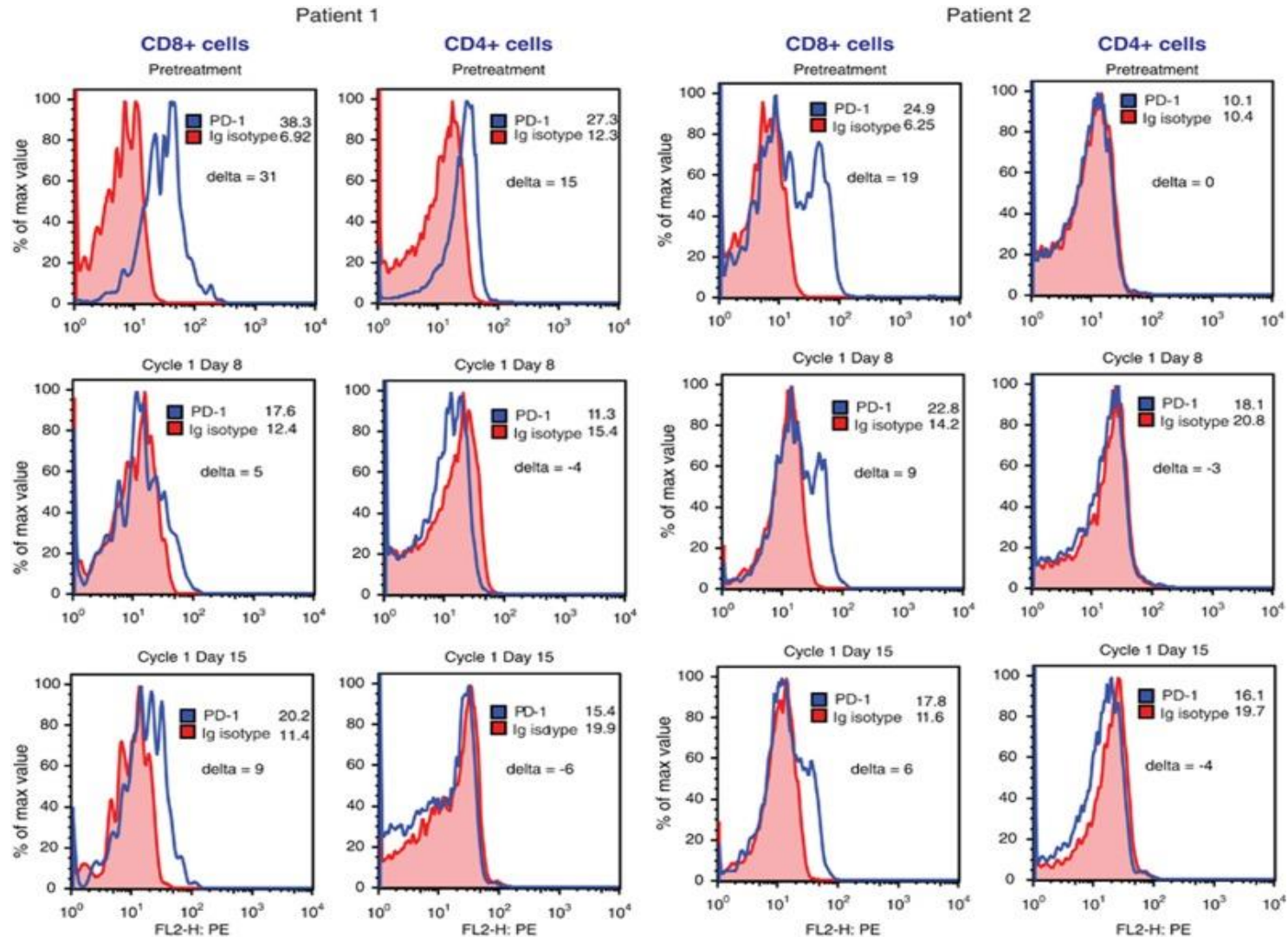
Drug	Day	esBEACOPP	BrECADD
Bleomycin [mg/m²]	8	10	
Etoposide [mg/m²]	1-3(2-4)	200	150
Doxorubicin [mg/m²]	1 (2)	35	40
Cyclophosphamide [mg/m²]	1 (2)	1250	1250
Vincristine [mg/m²]¹	8	1.4	
Brentuximab vedotin [mg/kg body weight]² 1.8			1
Procarbazine [mg/m²]	1-7 (2-8)	100	
Dacarbazine [mg/m²]	2-3		2x 250
Prednisone [mg/m²]	1-14 (2-15)	40	
Dexamethasone [mg]	2-5		40



International Panobinostat Phase II Study in Relapsed HL



PD1 expression levels decreased after treatment with panobinostat in both CD4- and CD8-positive cells



Hodgkin Lymphoma : Future Directions

