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Endometrial Cancer

A study to look at how well giredestrant works in people with Stage 1, Grade 1 endometrial cancer, how safe giredestrant is and how the body processes it

A Study of Giredestrant in Participants With Grade 1 Endometrial Cancer

Trial Status Trial Runs In Trial Identifier

Active, not recruiting 4 Countries NCT05634499 2022-002443-21
2023-504091-23-00 CO44195

The information is taken directly from public registry websites such as ClinicalTrials.gov, EuClinicalTrials.eu, ISRCTN.com, etc., and has not been edited.

Official Title:

A Phase II, Single-Arm Study of Giredestrant in Patients With Grade 1 Endometrial Cancer

Trial Summary:

This Phase II, global, single-arm study is designed to evaluate the efficacy, safety, and pharmacokinetics of giredestrant monotherapy in participants with Grade 1 endometrioid endometrial cancer.

Hoffmann-La Roche Sponsor		Phase 2 hase	
NCT05634499 2022-002443-21 2023-504091-23-00 CO44195 Trial Identifiers			
Eligibility Criteri	ia:		
Gender Female	Age #18 Years	Healthy Volunteers No	

1. Why is this study needed?

Endometrial cancer is a type of cancer that starts in the lining of the uterus, which is called the endometrium. If the cancer is only in the uterus, it is called Stage 1. When the cancer cells look more like normal cells and grow slowly, it is called Grade 1. Stage 1, Grade 1 endometrial cancer is usually low-risk. Treatment usually includes surgery to remove

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the uterus (hysterectomy). But some women may choose hormone medicine instead if they want to have children later or are not suitable for surgery. There is a need for better hormone treatments for people with endometrial cancer.

This study is testing a medicine called giredestrant. It is being developed to treat Stage 1, Grade 1 endometrial cancer.

Giredestrant is an experimental medicine. This means health authorities (like the U.S. Food and Drug Administration and European Medicines Agency) have not approved giredestrant for the treatment of endometrial cancer.

This study aims to test how safe giredestrant is, how well it works, and to understand what happens to giredestrant once it is in the body.

2. Who can take part in the study?

Women who are 18 years or older can take part in the study if they have Stage 1, Grade 1 endometrial cancer. Participants must be willing to receive the study treatment for 6 months before making a decision about surgery. They must also be willing to have small samples of tissue (biopsies) collected from the endometrium for testing throughout the study.

People may not be able to take part in this study if they have previously been treated for endometrial cancer, or have had certain cancer treatments within a specific timeframe before the study. Other reasons may include having conditions that affect the digestive system or liver, certain infections, or not being able to swallow pills.

People who are pregnant, or currently breastfeeding cannot take part in the study.

3. How does this study work?

People will be screened to check if they are able to participate in the study. The screening period will take place from 28 days before the start of treatment.

Everyone who joins this study will be given giredestrant as a pill (to be swallowed) once every day over 6 months, in 28-day treatment periods (called treatment 'cycles') until they have completed 6 treatment cycles. After 6 treatment cycles, the participant and the study doctor will decide on the next steps. They can either continue with the study treatment for up to 18 more treatment cycles or switch to a standard treatment (such as surgery or taking medication outside of the study).

This is an open-label study. This means everyone involved, including the participant and the study doctor, will know the study treatment the participant has been given.

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During this study, the study doctor will see participants at the start of each treatment cycle. They will see how well the treatment is working and any unwanted effects participants may have. These hospital visits will include taking a small sample of endometrial cells (called a 'biopsy') at the start of the study, and again at months 3 and 6. Participants will have follow-up visits after 1 month of completing the study treatment and then every 6 months. During these visits, the study doctor will check on the participant's well being. Total time of participation in the study will be about 8 months to more than 2 years (26 months). Participants have the right to stop study treatment and leave the study at any time, if they wish to do so.

4. What are the main results measured in this study?

The main results measured in the study to assess if the medicine has worked are

- The number of participants who have a decrease in cancer cells or an increase in normal cells lining the uterus (known as 'regression') in a biopsy of their endometrium taken at month 6 compared with the start of the trial
- The number and seriousness of any unwanted effects

Other key results measured in the study include

- How many participants have no cancer or abnormal cell growth in their biopsy at month 6?
- How much time is there between when the cancer starts to get better and when it gets worse?
- How much time is there between starting the study treatment and when the cancer starts to get better?
- How much time is there between starting the study treatment and the participant's cancer getting worse?

5. Are there any risks or benefits in taking part in this study?

Taking part in the study may or may not make participants feel better. But the information collected in the study can help other people with similar health conditions in the future.

It may not be fully known at the time of the study how safe and how well the study treatment works. The study involves some risks to the participant. But these risks are generally not greater than those related to routine medical care or the natural progression of the health condition. People interested in taking part will be informed about the risks and benefits, as well as any additional procedures or tests they may need to undergo. All details of the study will be described in an informed consent document. This includes information about possible effects and other options of treatment.

Risks associated with the study medicine

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Participants may have unwanted effects of the medicine used in this study. These unwanted effects can be mild to severe, even life-threatening, and vary from person to person. During this study, participants will have regular check-ups to see if there are any unwanted effects.

Giredestrant

Participants will be told about the known unwanted effects of giredestrant, and possible unwanted effects based on human and laboratory studies or knowledge of similar medicines. Known unwanted effects include pain in joints, loose, watery [and more frequent] stools, feeling tired or weak, muscle or bone pain, wanting to throw up, and high levels of certain substances in blood (liver enzymes).

Giredestrant will be given as a pill (given by mouth). Participants will be told about any known unwanted effects of swallowing pills.

The study medicine may be harmful to an unborn baby. Women must take precautions to avoid exposing an unborn baby to the study treatment.

Inclusion Criteria:

- Confirmed Grade 1 endometrial cancer (EC) of endometrioid histology for which participants are willing to receive 6-cycles of study therapy. An endometrial biopsy (EMB) or dilation and curettage (D&C) fresh collected within the screening period or archival sample collected within 3 months prior to screening must be provided to a central laboratory for histologic confirmation to determine eligibility.
- Eastern Cooperative Oncology Group (ECOG) Performance Status of 0 or 1
- Magnetic resonance imaging (MRI)-confirmation of non-deeply invasive tumor (<50% myometrial invasion)
- MRI or computed tomography (CT)-confirmation of no extrauterine disease
- Willing to undergo a minimum of 6 continuous cycles of therapy before decision on surgery
- No prior treatment for endometrial cancer
- Able and willing to take oral medications
- Willingness and ability to comply with scheduled visits, treatment plans, laboratory tests, and other study procedures
- Adequate hematologic and end-organ function, as defined in the protocol
- Negative HIV test at screening, with the following exception: Patients with a positive HIV test at screening are eligible provided they are stable on anti-retroviral therapy, have a CD4 count #200/µL, and have an undetectable viral load.
- For female participants of childbearing potential: agreement to remain abstinent (refrain from heterosexual intercourse) or use contraception, and agree to refrain from donating eggs, during the treatment period and for 30 days after the final dose of giredestrant, as defined in the protocol

Exclusion Criteria:

- Pregnancy or breastfeeding, or intention of becoming pregnant during the study or within 30 days after the final dose of giredestrant or within the time period specified per local prescribing guidelines after the final dose of the investigator's choice of endocrine therapy
- Participants with non-endometrioid histologies, such as serous, clear cell, and mixed

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- Treatment with investigational therapy within 28 days prior to initiation of study enrollment
- Treatment for cancer including but not limited to, chemotherapy, immunotherapy, cyclin-dependent kinase (CDK)4/6 inhibitors, endocrine therapy, biologic therapy, or herbal therapy within 28 days prior to the initiation of study enrollment
- Any gastrointestinal condition causing malabsorption or obstruction (e.g., celiac sprue, gastric bypass surgery, strictures, adhesions, history of small bowel resection, blind loop syndrome)
- · Known hypersensitivity to giredestrant or its excipients
- Known intercurrent illness or psychiatric illness/social situations that will limit compliance with study requirements
- Evidence or high suspicion of metastatic/extrauterine disease at enrollment
- Unwilling or unable to comply with study-related procedures, including all endometrial sampling/ biopsies
- Planned surgery, either for the treatment of cancer or any other surgery, during the study treatment period and up to 10 days after the completion of study treatment
- Serious infections requiring IV antibiotics within 7 days prior to initiation of study treatment or any active infection that, in the opinion of the investigator, could impact participant safety
- Participants who have clinically significant liver disease consistent with Child-Pugh Class B or C, including active hepatitis (e.g., hepatitis B virus [HBV] or hepatitis C virus [HCV]), current alcohol abuse, cirrhosis, or positive test for viral hepatitis, as defined in the protocol
- Treatment with strong CYP3A4 inhibitors or inducers within 14 days or 5 drug elimination half-lives (whichever is longer) prior to initiation of study treatment
- Any serious medical condition or abnormality in clinical laboratory tests that precludes the participant's safe participation in and completion of the study
- History of other malignancy within 5 years prior to screening, except for those with an expected negligible risk for metastases or death (e.g., 5-year overall survival 90%) after curative treatment
- Active tuberculosis
- Severe infection per investigator judgment at the time of enrollment, including but not limited to, use of
 systemic antibiotics, hospitalization for complications of infection, bacteremia, or severe pneumonia, or
 any active infection that, in the opinion of the investigator, could impact participant safety
- Significant cardiovascular disease, such as cardiac disease New York Heart Association Class II or greater, myocardial infarction, or cerebrovascular accident within 3 months prior to enrollment, unstable arrhythmias, or unstable angina
- Active cardiac disease or history of cardiac dysfunction, as defined in the protocol
- Major surgical procedure other than for diagnosis within 28 days prior to enrollment or anticipation of need for a major surgical procedure during the study
- Prior allogeneic bone marrow transplantation or solid organ transplant
- Any other diseases, metabolic dysfunction, physical examination finding, or clinical laboratory
 finding giving reasonable suspicion of a disease or condition that contraindicates the use of an
 investigational drug or that may affect the interpretation of the results or renders the participant at high
 risk for treatment complications illnesses or conditions that interfere with the participant's capacity to
 understand, follow, and/or comply with study procedures