ForPatients
by Roche

Non Hodgkin Lymphoma (NHL)Lymphoma

A clinical trial to look at how well RO7443904 and glofitamab work (when taken together) to treat people with relapsed or refractory Non-Hodgkin's lymphoma, and how safe the combination is

A Study to Evaluate the Safety, Tolerability, Pharmacokinetics, and Efficacy of RO7443904 in Combination With Glofitamab in Participants With Relapsed/Refractory B-Cell Non-Hodgkin's Lymphoma

Trial Status	Trial Runs In	Trial Identifier
Terminated	6 Countries	NCT05219513 BP43131

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:

An open-label, phase I study to evaluate the safety, tolerability, pharmacokinetics, and preliminary efficacy of RO7443904 in combination with glofitamab in participants with relapsed/refractory B-cell non-Hodgkin's lymphoma.

Trial Summary:

This is a first-in human, open-label, Phase 1 dose-escalation study in order to determine the maximum tolerated dose (MTD) and/or recommended Phase 2 dose (RP2D) for intravenous (IV) and/or subcutaneous (SC) dosing schemes of this combination treatment, and to evaluate the safety, tolerability, pharmacokinetics, and preliminary anti-tumor activity of this combination treatment in participants with relapsed/refractory B-cell non Hodgkin lymphoma (r/r NHL).

Hoffmann-La Roche
Sponsor

Phase 1
Phase

NCT05219513 BP43131
Trial Identifiers

Eligibility Criteria:

Gender	Age	Healthy Volunteers
All	#18 Years	No

1. Why is the BP43131 clinical trial needed?

Non-Hodgkin's lymphoma (NHL) includes a range of diseases such as follicular lymphoma, chronic lymphocytic leukaemia and mantle cell lymphoma. Despite recent treatment advances, the number of people that survive NHL is lower in the United States and Europe than for other cancers. There is a demand for new treatment options to improve outcomes for people with NHL.

The goal of this clinical trial is to determine how well RO7443904 and glofitamab work (when taken together) to treat people with NHL, and how safe the combination is.

2. How does the BP43131 clinical trial work?

This clinical trial is recruiting people who have a health condition called NHL. People can take part if they have NHL that has returned after successful treatment (relapsed) or has never responded to treatment (refractory) or has no other treatment options.

The purpose of this clinical trial is to test the safety of RO7443904 when given with glofitamab, and to understand the way the body processes RO7443904.

How long a participant will be given the clinical trial treatment RO7443904 plus glofitamab for depends on how the participant's cancer responds to the treatment. Participants will be seen by the clinical trial doctor regularly. These hospital visits will include checks to see how the participant is responding to the treatment and any side effects they may be having. Participants' total time in the clinical trial will depend on how their disease responds to treatment (could range from 1 day to more than 11 months). Participants are free to stop trial treatment and leave the clinical trial at any time.

3. What are the main endpoints of the BP43131 clinical trial?

The main clinical trial endpoints (the main results that are measured in the trial to see if the medicine has worked) are:

- The type and number of dose-limiting toxicities (treatment side effects that are too severe to allow for dose increases for participants later in the clinical trial)
- The type and number of side effects (any unexpected medical problem that occurs while receiving the treatment)

For Part 4 only (see Section 5):

- How many people have smaller tumours after treatment (known as 'objective response rate')
- How many people have no signs of cancer on scans or tests (known as 'complete response rate')

- How many people's tumours are smaller or the same size after treatment (known as 'disease control rate')
- How much time passes from starting treatment to tumours getting smaller or disappearing

The other clinical trial endpoints are:

- How RO7443904 enters and moves through the body (pharmacokinetic properties)
- The amount of anti-drug antibodies detected within the body - an immune response generated by the body in response to a treatment
- Changes in participants' symptoms and quality of life

All endpoints will be looked at from the start until the end of the clinical trial.

4. Who can take part in this clinical trial?

Patients can take part in this trial if they are aged 18 or over, have a body weight of at least 40kg and have been diagnosed with relapsed or refractory NHL according to certain criteria.

Patients may not be able to take part in this trial if they are pregnant, become pregnant or if they are currently breastfeeding. Patients who have received cancer immunotherapy within 4 weeks prior to the start of the clinical trial will not be able to take part.

5. What treatment will participants be given in this clinical trial?

This clinical trial is split into five parts (1a, 1b, 2, 3 and 4). During the trial, you will only participate in one of these parts.

Every participant will receive a single pre-treatment dose of obinutuzumab as an infusion into the vein (intravenous) within 7 days prior to Cycle 1 Day 1, regardless of which part of the clinical trial they are assigned to.

Part 1a: Participants will receive their first dose of glofitamab on Cycle 1 Day 1. A week later, a second dose of glofitamab will be given (Cycle 1 Day 8), and then another dose will be given a week after that (Cycle 2 Day 1). The first dose of RO7443904 will be given as an intravenous infusion at Cycle 1 Day 10. Alternatively, the first dose of RO7443904 may be given at Cycle 2 Day 3 **or** Cycle 2 Day 8). From the second dose of RO7443904 onwards, glofitamab will be given with RO7443904 on the same day. From then, RO7443904 and glofitamab will be given together once every 3 weeks.

Part 1b: The treatment schedule will be the same as outlined in Part 1a, with the only difference being that the third dose of RO7443904 will be given as an injection under the skin (subcutaneous) instead of as an intravenous infusion.

Part 2: The treatment schedule will be the same as outlined in Part 1a. The first dose of RO7443904 will be given as an intravenous infusion, but all the following doses of RO7443904 will be given as an injection under the skin.

Part 3: The treatment schedule will be the same as outlined in Part 1a, however all doses of RO7443904 will be given as an injection under the skin.

Part 4: The treatment schedule will be the same as outlined in Part 1a, however a specific dose of RO7443904 will be chosen and given either as an injection under the skin or an intravenous infusion, depending on the results from the previous parts of the clinical trial. This is the dose expansion part of the clinical trial.

6. Are there any risks or benefits in taking part in this clinical trial?

The safety or effectiveness of the experimental treatment or use may not be fully known at the time of the trial. Most trials involve some risks to the participant, although it may not be greater than the risks related to routine medical care or the natural progression of the health condition. Potential participants will be told about any risks and benefits of taking part in the clinical trial, as well as any additional procedures, tests, or assessments they will be asked to undergo. These will all be described in an informed consent document (a document that provides people with the information they need to make a decision to volunteer for a clinical trial). A potential participant should also discuss these with members of the research team and with their usual healthcare provider. Anyone interested in taking part in a clinical trial should know as much as possible about the trial and feel comfortable asking the research team any questions about the trial.

Risks associated with the clinical trial drugs

Participants may have side effects (an unwanted effect of a drug or medical treatment) from the drugs used in this clinical trial. Side effects can be mild to severe and even life-threatening and can vary from person to person.

RO7443904 and glofitamab

RO7443904 has not yet been tested in humans. For this reason, the side effects of this drug are not known at this time. Potential participants will be told about the potential side effects, based on laboratory studies or knowledge of similar drugs.

Potential participants will be told about the known side effects of glofitamab, which has been studied previously in several clinical trials using human participants, and where relevant, also potential side effects based on human and laboratory studies or knowledge of similar drugs.

RO7443904 will be given by intravenous infusion (involves inserting a needle into the arm) or subcutaneous injection (involves inserting a needle into the fatty area under the skin of the trunk or limbs). Glofitamab will be given by intravenous infusion. Participants will be told about any known side effects of intravenous infusions or subcutaneous injections.

Potential benefits associated with the clinical trial

Participants' health may or may not improve from participation in the clinical trial, but the information that is collected may help other people who have a similar medical condition in the future.

For more information about this clinical trial see the **For Expert** tab on the specific ForPatients page or follow this link to ClinicalTrials.gov

Inclusion Criteria:

- Body weight >=40 kg
- Histologically confirmed hematological malignancy that is expected to express CD19 and CD20 and with clinical evidence of treatment need; 2) relapse after or failure to respond to at least two prior treatment regimens; and 3) no other available treatment options that are known to provide clinical benefit
- Must have at least one measurable target lesion (>=1.5 cm) in its largest dimension by computed tomography (CT) scan
- Able and willing to provide a fresh tumor biopsy from a safely accessible site, per Investigator's determination
- Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1
- Life expectancy of >=12 weeks
- Adequate liver, hematological and renal function
- Negative serologic or polymerase chain reaction (PCR) test results for acute or chronic hepatitis B virus (HBV) infection
- Negative test results for hepatitis C virus (HCV) and HIV
- A female participant is eligible to participate if she is not pregnant, not breastfeeding, and at least one of the following conditions applies: 1) Women of non-childbearing potential 2) Women of childbearing potential (WOCBP), who, agree to remain abstinent (refrain from heterosexual intercourse) or use of one highly effective contraceptive method during the treatment period and for at least 18 months after obinutuzumab or 5 months after the final dose of RO7443904, 2 months after final dose of glofitamab or 3 months after the final dose of tocilizumab
- Male participants must remain abstinent (refrain from heterosexual intercourse) or use contraceptive measures such as a condom plus an additional contraceptive method with a partner who is a WOCBP during the treatment period and for at least 3 months after obinutuzumab, 5 months after the final dose of RO7443904, 2 months after the final dose of glofitamab or 2 months after the final dose of tocilizumab, whichever is longer

Exclusion Criteria:

- Circulating lymphoma cells, defined by out-of-range (high) absolute lymphocyte count (ALC) or the presence of abnormal cells in the peripheral blood signifying circulating lymphoma cells
- Participants with known acute bacterial, viral, or fungal infection 72 hours prior to glofitamab infusion
- Participants with known active infection or reactivation of a latent infection
- Pregnant, breastfeeding, or intending to become pregnant during the study
- Prior treatment with systemic immunotherapeutic agents
- History of treatment-emergent, immune-related adverse events (AEs) associated with prior immunotherapeutic agents
- Persistent AEs from prior anti-cancer therapy Grade >=1
- Treatment with standard radiotherapy, any chemotherapeutic agent, or treatment with any other investigational or approved anti-cancer agent
- Prior solid organ transplantation
- Prior allogeneic stem cell transplant (SCT)
- Autologous SCT within 100 days prior to obinutuzumab infusion
- Autoimmune disease in active phase or exacerbation/flare within at least 6 months of enrollment
- History of immune deficiency disease that increases the risk of infection
- History of contraindication and/or severe allergic or anaphylactic reactions to monoclonal antibody therapy and/or prophylactic drugs used for cytokine release syndrome (CRS) and tumor lysis syndrome (TLS)
- History of confirmed progressive multifocal leukoencephalopathy
- Current or past history of central nervous system (CNS) lymphoma or CNS disease
- Evidence of significant, uncontrolled concomitant diseases that could affect compliance with the protocol or interpretation of results
- Major surgery or significant traumatic injury <28 days prior to the GpT infusion or anticipation of the need for major surgery during study treatment
- Participants with another invasive malignancy in the last 2 years
- Significant cardiovascular disease
- Administration of a live, attenuated vaccine within 4 weeks before GpT infusion or anticipation that such a live attenuated vaccine will be required during the study
- Received systemic immunosuppressive medications for reasons other than anticancer therapy within the last 6 months of enrollment with the exception of corticosteroid treatment <= 25 mg/day prednisone or equivalent
- History of illicit drug or alcohol abuse within 12 months prior to screening, in the Investigator's judgment
- Any other diseases, metabolic dysfunction, physical examination finding, or clinical laboratory finding giving reasonable suspicion of a disease or condition that would contraindicate the use of an investigational drug