

POWERED BY COR2ED

#### MEETING SUMMARY

ASCO GI, SATURDAY JANUARY 17<sup>TH</sup> 2015

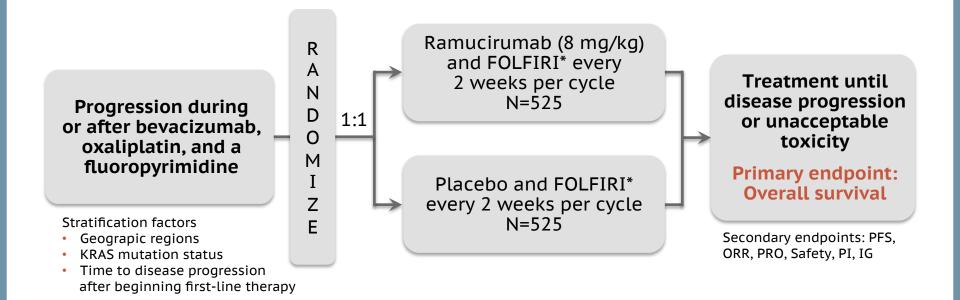
BY DR. GUILLEM ARGILES, BARCELONA, SPAIN

**Cancers of the Lower GI Tract** 

RAISE: A RANDOMIZED, DOUBLE-BLIND, MULTICENTER PHASE III STUDY OF IRINOTECAN, FOLINIC ACID, AND 5-FLUOROURACIL (FOLFIRI) PLUS RAMUCIRUMAB OR PLACEBO IN PATIENTS WITH METASTATIC COLORECTAL CARCINOMA PROGRESSION DURING FOR FOLLOWING FIRST-LINE COMBINATION THERAPY WITH BEVACIZUMAB, OXALIPLATIN, AND A FLUOROPYRIMIDINE

Josep Tabernero\*, Allen Lee Cohn, Radka Obermannova, Gyorgy Bodoky, Rocio Garcia-Carbonero, Tudor-Eliade Ciuleanu, David C. Portnoy, Eric Van Cutsem, Axel Grothey, Jana Prausová, Pilart Garcia-Alfonso, Kentaro Yamazaki, Philip R. Clingan, Vittorina Zagonel, Tae Won Kim, Lorrinda Simms, Shao-Chun Chang, Federico Nasroulah, Takayuki Yoshino

#### **RAISE: STUDY DESIGN**

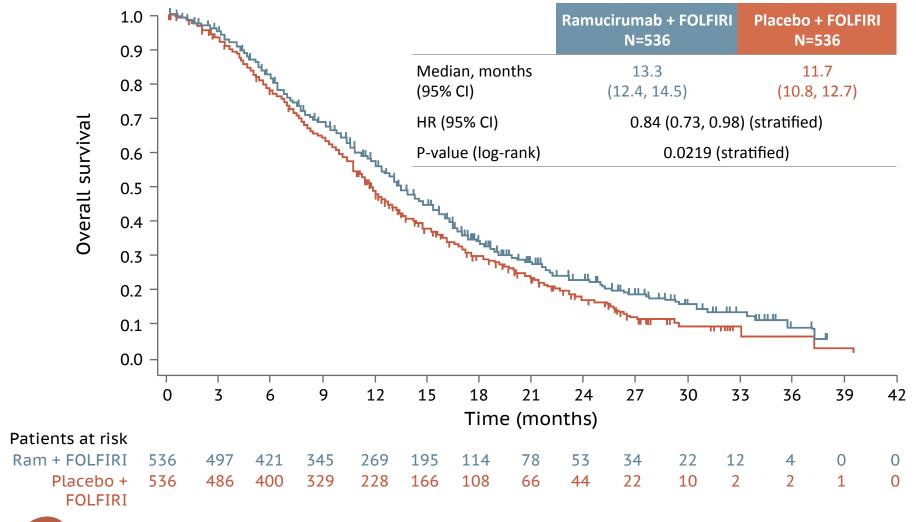


#### Sample size assumptions

- Hazard ratio of 0.8
- Median overall survival of 10 months in the control arm vs 12.5 months with ramucirumab with a 2-sided a level of 0.05
- Enrollment of 1050 patients with 756 events for 85% power
- Gatekeeping from OS to PFS to ORR



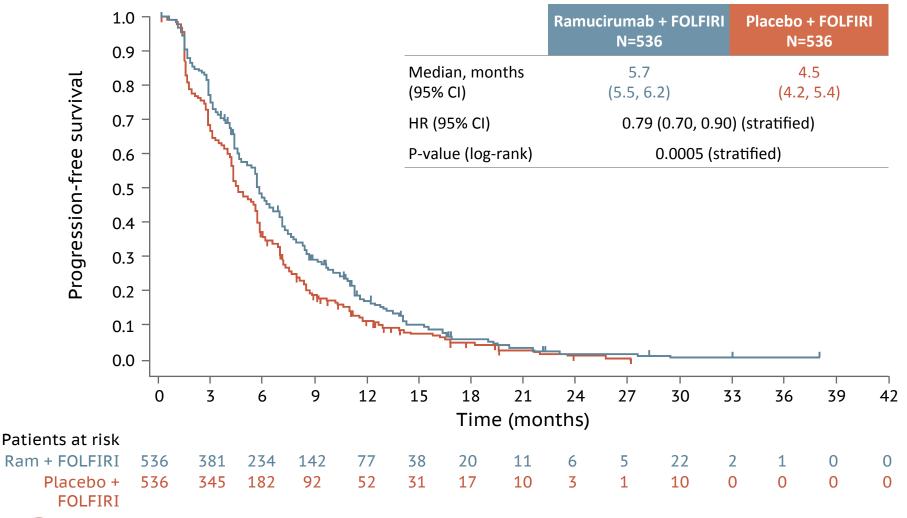
#### **RAISE: STUDY DESIGN**





CI, confidence interval; HR, hazard ratio; Ram, Ramucirumab.

#### RAISE: PROGRESSION-FREE SURVIVAL





CI, confidence interval; HR, hazard ratio; Ram, Ramucirumab.

### TREATMENT-EMERGENT ADVERSE EVENTS (ALL GRADES 20% OR HIGHER, OR GRADE 3-5 5% OR HIGHER IN EITHER TREATMENT ARM)

	Any Grade				Grade ≥3				
Preferred Term	Ramucirumab + FOLFIRI N=529		Placebo + FOLFIRI N=528		Ramucirumab + FOLFIRI N=529		Placebo + FOLFIRI N=528		
	n	%	n	%	n	%	n	%	
Any TEAE	522	98.7	519	98.3	418	79.0	329	62.3	
Neutropenia	311	58.8	241	45.6	203	38.4	123	23.3	
Fatigue	<i>305</i>	<i>57.7</i>	<i>275</i>	<i>52.1</i>	61	11.5	41	7.8	
Diarrhea	316	59.7	271	51.3	57	10.8	51	9.7	
Hypertension	136	25.7	45	8.5	57	10.8	15	2.8	
Stomatitis	163	30.8	110	20.8	20	3.8	12	2.3	
Abdominal pain	140	26.5	139	26.3	18	3.4	19	3.6	
Thrombocytopenia	<i>150</i>	28.4	<i>72</i>	13.6	16	3.0	4	0.8	
Vomiting	154	29.1	144	27.3	15	2.8	13	2.5	
Nausea	262	49.5	271	51.3	13	2.5	14	2.7	
Decreased appetite	198	37.4	144	27.3	13	2.5	10	1.9	
Anemia	86	16.3	110	20.8	8	1.5	19	3.6	
Constipation	151	28.5	120	22.7	5	0.9	8	1.5	
Peripheral edema	108	20.4	48	9.1	1	0.2	0		
Epistaxis	177	33.5	79	15.0	0		0		
Alopecia	155	29.3	165	31.3	0		0		

 The febrile neutropenia rate (any grade) was 3.6% in ramucirumab patients and 2.7% in placebo patients



#### **RAISE: ADVERSE EVENTS OF SPECIAL INTEREST**

	Any Grade				Grade ≥3				
	Ramucirumab + FOLFIRI N=529		FOL	Placebo + FOLFIRI N=528		Ramucirumab + FOLFIRI N=529		Placebo + FOLFIRI N=528	
	n	%	n	%	n	%	n	%	
Bleeding/hemorrhage event	232	43.9	120	22.7	13	2.5	9	1.7	
Hypertension	138	26.1	45	8.5	59	11.2	15	2.8	
Proteinuria	90	17.0	24	4.5	16	3.0	1	0.2	
GI hemorrhage	65	12.3	36	6.8	10	1.9	6	1.1	
Venous thromboembolic events	44	8.3	34	6.4	22	4.2	11	2.1	
Infusion-related reaction	31	5.9	16	3.0	4	0.8	2	0.4	
Renal failure	18	3.4	18	3.4	7	1.3	5	0.9	
GI perforation	9	1.7	3	0.6	9	1.7	3	0.6	
Arterial thromboembolic event	8	1.5	13	2.5	4	0.8	6	1.1	
Pulmonary hemorrhage events	7	1.3	3	0.6	0		0		
Healing complication	6	1.1	1	0.2	1	0.2	0		
Congestive heart failure	4	0.8	3	0.6	4	0.8	3	0.6	
Fistula	4	0.8	2	0.4	0		0		
RPLS	1	0.2	1	0.2	0		0		
Thrombotic microangiopathy	1	0.2	0		1	0.2	0		
Hepatic hemorrhage event	0		1	0.2	0		1		



#### CONCLUSIONS

- RAISE met its primary endpoint
  - Demonstrated a statistically significant improvement in overall survival for ramucirumab and FOLFIRI vs placebo and FOLFIRI
  - In second-line metastatic CRC patients who progressed after first-line treatment wit bevacizumab, oxaliplatin, and a fluoropyrimidine
- Consistent survival benefits were observed across subgroups
- Ramucirumab in combination with FOLFIRI was well tolerated in patients with mCRC. Overall, the adverse events were considered manageable



# PREOPERATIVE HEPATIC AND REGIONAL ARTERIAL CHEMOTHERAPY (PHRAC) REDUCES THE OCCURRENCE OF METACHRONOUS LIVER METASTASIS AFTER CURATIVE COLORECTAL CANCER RESECTION

A PROSPECTIVE, MULTI-CENTER, RANDOMIZED CONTROLLED TRIAL

Jianmin Xu

Zhongshan Hospital, Fudan University Shanghai, China

#### **PHRAC**

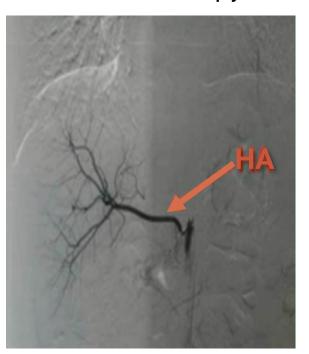
#### Right colon cancer

Brain tumor supplying artery chemotherapy



Common hepatic artery chemotherapy

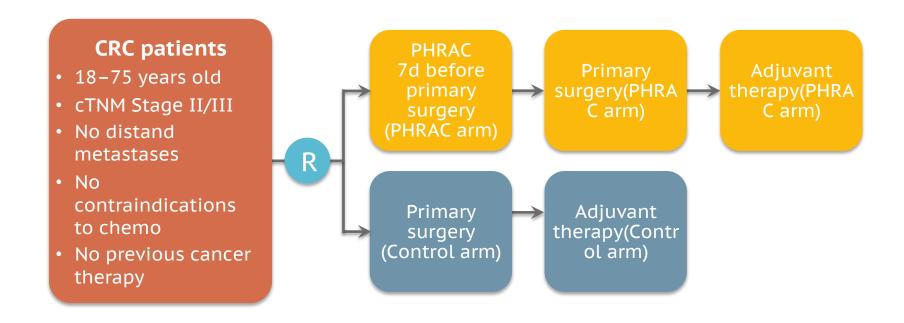




FUDR 650 mg/m2, Oxaliplatin 75 mg/m<sub>2</sub>, MMC 8 mg/m<sup>2</sup> Half in each artery



#### STUDY DESIGN





#### **OUTCOMES**

#### **Primary outcome**

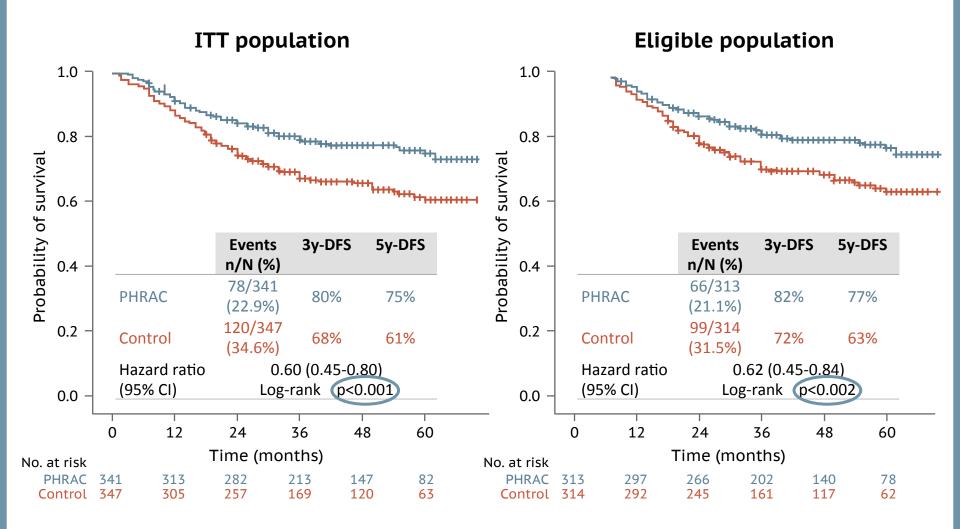
DFS

#### **Secondary outcome**

- Cumulative incidence of liver metastasis
- OS
- Safety



#### PRIMARY OUTCOME-DFS





## VITAMIN D STATUS AND SURVIVAL OF METASTATIC COLORECTAL CANCER PATIENTS: RESULTS FROM CALGB/SWOG 80405 (ALLIANCE)

Kimmie Ng, Alan P. Venook, Kaori Sato, Bruce W. Hollis, Donna Niedzwiecki, Cynthia Ye, I-Wen Chang, Bert H. O'Neil, Federico Innocenti, Heinz-Josef Lenz, Charles D. Blanke, Robert J. Mayer, Charles S. Fuchs, Jeffrey A. Meyerhardt



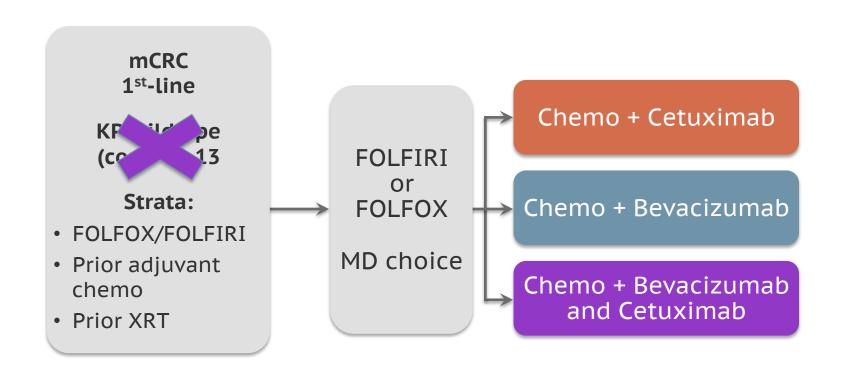








## CALGB/SWOG 80405: FINAL DESIGN ORIGINAL



 $N = \frac{1140}{2334}$ 

Endpoint: Overall Survival



#### STATISTICAL METHODS

- Pre-planned, prospective, observational cohort study
- Primary endpoint: Overall survival
  - Kaplan-Meier method
  - Log rank test
- Plasma 25(OH)D measured by radioimmunoassay prior to treatment
- Validated diet and lifestyle questionnaires prior to treatment
- Multivariable analyses using Cox proportional hazards models
- All P values two-sided and considered significant at the 0.05 level



#### **BASELINE CHARACTERISTICS**

Median 25(OH)D = 17.2 ng/mL

	Q1 (n=208)	Q2 (n=209)	Q3 (n=208)	Q4 (n=210)	Q5 (n=208)	P
Median 25(OH)D, ng/mL (range)	8.0 2.2-10.8)	13.6 (10.9-15.4)	17.2 (15.4-19.2)	21.4 (19.3-24.0)	27.5 (24.1-72.7)	-
Median age, years	59	60	60	61	61	0.07
Male, %	48	64	58	64	55	0.004
Black, %	25	12	6	7	2	<0.0001
ECOG 0 / 1, %	49 / 50	64 / 36	58 / 42	63 / 37	70 / 30	0.002
RAS WT / mut / unknown, %	33 / 30 / 37	31 / 30 / 39	26 / 39 / 35	38 / 29 / 33	37 / 21 / 42	0.02



## HIGHER VITAMIN D LEVELS ASSOCIATED WITH BETTER SURVIVAL

