

HOW CAN WE UNDERSTAND AND DEFINE RE-CHALLENGE IN THE TREATMENT OF METASTATIC COLORECTAL CANCER?

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DISCLAIMER

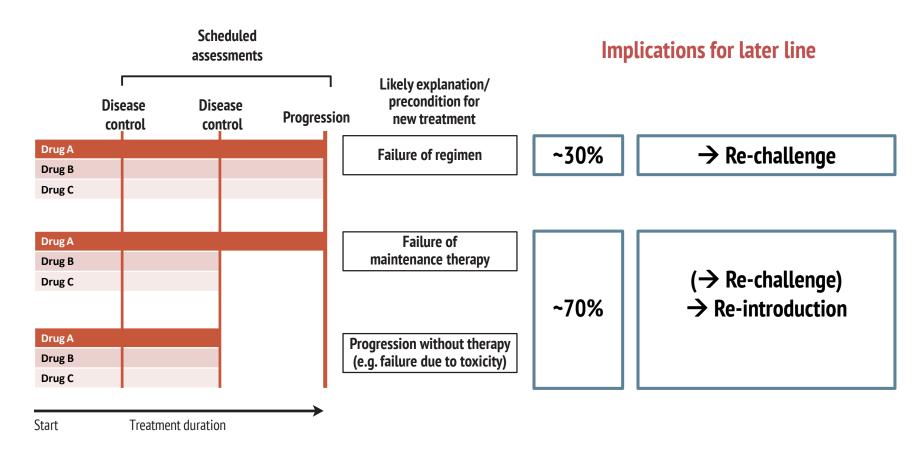


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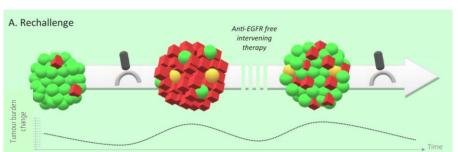
CLINICAL UNDERSTANDING OF RE-TREATMENT

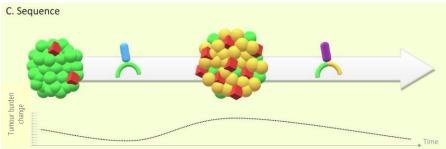


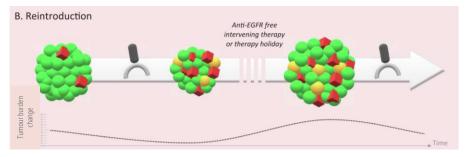


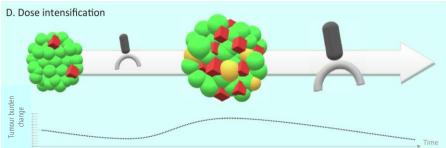
MOLECULAR UNDERSTANDING OF RE-TREATMENT





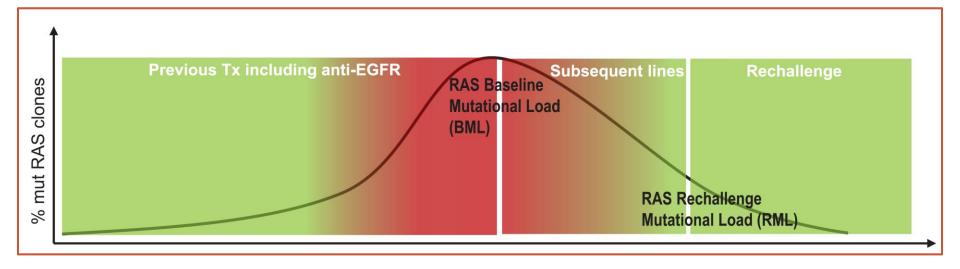






MOLECULAR RATIONAL OF RE-CHALLENGE





CONCORDANCE BETWEEN TUMOUR TISSUE ASSESSMENT AND ctDNA-ANALYSIS (N=95)

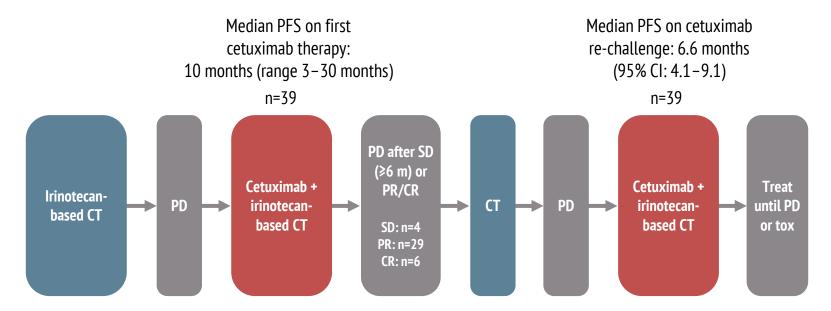


		Tissue analysis				
Accuracy	KRAS	Mutant	WT	Sensitivity	Specificity	Accuracy
cfDNA - Analysis	Mutant	36	1	92%	98%	96%
	WT	3	55			
	total	39	56			
	BRAF	Mutant	WT	Sensitivity	Specificity	Accuracy
cfDNA - Analysis	Mutant	5	0	100%	100%	100%
	WT	0	90			
	total	5	90			
	All Mutations	Mutant	WT	Sensitivity	Specificity	Accuracy
cfDNA - Analysis	Mutant	41	1	93%	98%	96%
	WT	3	50			
	total	44	51			

CLINICAL EVIDENCE

PFS AFTER CETUXIMAB TREATMENT AND RE-CHALLENGE: STUDY DESIGN





Median interval between last cetuximab cycle and first cycle of the following cetuximab re-treatment: 6 months (range 2–12 months)

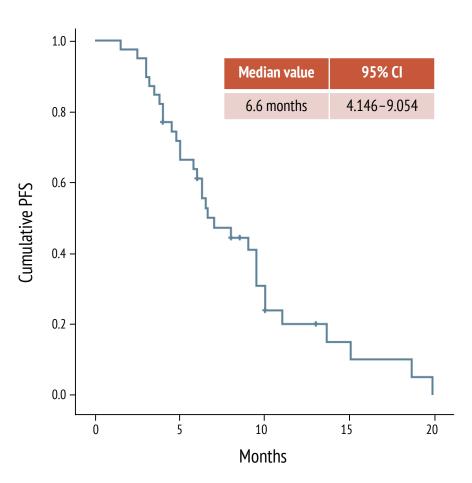
Median number of therapy lines before cetuximab re-challenge: 4 (range 3–7)

RE-CHALLENGE WITH CETUXIMAB: KEY RESULTS



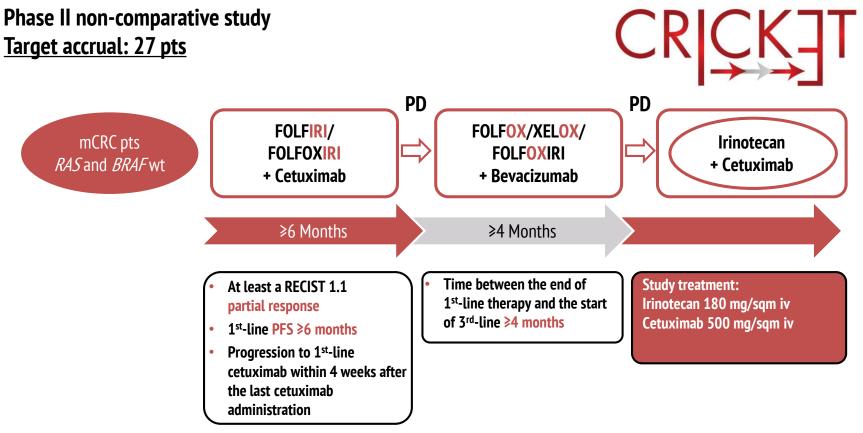
Clinical response after 1st cetuximab-based therapy and 2nd cetuximab-based therapy in 39 patients

Best response 1 st cetuximab	Best response rechallenge	No. of patients	Total no. (%)
PR	CR	1	2 (5)
CR		1	
SD	PR	1	19 (49)
PR		14	
CR		4	
SD	SD	3	14 (36)
PR		10	
CR		1	
PR	PD	4	4 (10)



PHASE II NON-COMPARATIVE CRICKET STUDY: STUDY DESIGN



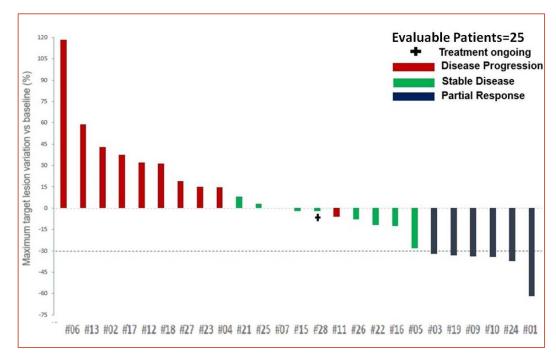


Cetuximab was administered every 2 weeks, which is an off-label regimen

PHASE II NON-COMPARATIVE CRICKET STUDY: BEST RESPONSE



	Study population N=28 No (%) [95% CI]	
Partial response	6 (21.5%)	
Confirmed partial response	4 (14.3%)	
Unconfirmed partial response	2 (7.1%)	
Stable disease	9 (32.1%)	
Progressive disease	13 (46.4%)	
• Radiological PD	10 (35.7%)	
• Clinical PD	3 (10.7%)	
Response rate	6 (21.5%) [10-40%]	
Disease control rate	15 (53.6%) [36-70%]	



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