

KURZPROTOKOLL **IPSOS**

Öffentlicher Titel	Atezolizumab bei unbehandeltem lokal fortgeschrittenem oder metastasiertem nicht-kleinzelligem Lungenkarzinom
Wissenschaftl. Titel	A Phase III, Open-Label, Multicenter, Randomized Study to Investigate the Efficacy and Safety of Atezolizumab Compared With Chemotherapy in Patients With Treatment Naïve Advanced or Recurrent (Stage IIIB Not Amenable for Multimodality Treatment) or Metastatic (Stage IV) Non-Small Cell Lung Cancer Who Are Deemed Unsuitable for Platinum-Containing Therapy
Kurztitel	IPSOS
Studienart	multizentrisch, Therapiestudie, randomisiert, offen/unverblindet, Pharma-Studie, zweiarmig, kontrolliert
Studienphase	Phase III
Erkrankung	Lunge: Lungenkrebs: Nicht kleinzelliges Lungenkarzinom (NSCLC) - Erstlinie
Einschlusskriterien	<ul style="list-style-type: none">- Male or female, age ≥ 18 years- Histologically or cytologically confirmed diagnosis of advanced or recurrent (Stage IIIB not amenable for multimodality treatment) or metastatic (Stage IV) NSCLC as per the American Joint Committee on Cancer (AJCC) 7th edition- No sensitizing epidermal growth factor receptor (EGFR) mutation (L858R or exon 19 deletions) or anaplastic lymphoma kinase (ALK) fusion oncogene detected- No prior systemic treatment for advanced or recurrent (Stage IIIB not amenable for multimodality treatment) or metastatic (Stage IV) NSCLC as per the AJCC 7th edition- Life expectancy ≥ 8 weeks- Deemed unsuitable for any platinum-doublet chemotherapy by the investigator due to poor performance status (ECOG PS of 2-3) However, patients ≥ 70 years of age who have an ECOG PS of 0 or 1 may be included due to:<ul style="list-style-type: none">- a) substantial comorbidities- b) contraindication(s) for platinum doublet chemotherapy.- Representative formalin-fixed paraffin-embedded (FPPE) tumor tissue block obtained during course of disease (archival tissue) or at screening (tumor blocks are highly preferred for central analysis of PD-L1 expression and exploratory biomarkers)- Patients with treated, asymptomatic central nervous system (CNS) metastases- Measurable disease (by RECIST v1.1)- Adequate hematologic and end organ function- Female patients of childbearing potential and male patients with partners of childbearing potential agree to use protocol defined methods of contraception and to remain abstinent for at least 5 months after the last dose of atezolizumab, and Agreement to Refrain from donating eggs during this same period
Ausschlusskriterien	<ul style="list-style-type: none">- Cancer-Specific Exclusion Criteria:<ul style="list-style-type: none">-> Patients younger than 70 years who have an ECOG PS of 0 or 1-> Active or untreated central nervous system metastases-> Uncontrolled tumor-related pain-> Uncontrolled pleural effusion, pericardial effusion, or ascites requiring recurrent drainage procedures (once monthly or more frequently). Patients with indwelling catheters (e.g., PleurX) are allowed-> Uncontrolled or symptomatic hypercalcemia (ionized calcium > 1.5 mmol/L or calcium > 12 mg/dL or corrected serum calcium $> \text{ULN}$)-> History of other malignancy within 5 years prior to screening, with the exception of those with a negligible risk of metastasis or death treated with expected curative outcome

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- -> Patients who have received prior neo-adjuvant, adjuvant chemotherapy, radiotherapy, or chemoradiotherapy with curative intent for non-metastatic disease must have experienced a treatment-free interval of at least 6 months from randomization since the last chemotherapy, radiotherapy, or chemoradiotherapy
- General Medical Exclusion Criteria:
 - -> Women who are pregnant or lactating, or intending to become pregnant during the study. Women of childbearing potential including women who have had a tubal ligation, must have a negative serum pregnancy test result within 14 days prior to initiation of study drug
 - -> History of autoimmune disease
 - -> Patients with eczema, psoriasis, lichen simplex chronicus, or vitiligo with dermatologic manifestations only (e.g., patients with psoriatic arthritis would be excluded)
 - -> History of idiopathic pulmonary fibrosis (IPF), organizing pneumonia (e.g., bronchiolitis obliterans), drug-induced pneumonitis, idiopathic pneumonitis, or evidence of active pneumonitis on screening chest CT scan. History of radiation pneumonitis in the radiation field (fibrosis) is permitted.
 - -> Known positivity for human immunodeficiency virus (HIV)
 - -> Known active hepatitis B or known active hepatitis C
 - -> Active tuberculosis
 - -> Severe infections within 4 weeks prior to randomization
 - -> Significant cardiovascular disease
 - -> Major surgical procedure other than for diagnosis within 4 weeks prior to randomization or anticipation of need for a major surgical procedure during the course of the study
 - -> Prior allogeneic bone marrow transplantation or solid organ transplant
 - -> Any serious medical condition (including metabolic dysfunction, physical examination finding) or abnormality in clinical laboratory tests that, in the investigator's judgment, precludes the patient's safe participation in and completion of the study or that may affect the interpretation of the results or render the patient at high risk for treatment complications
 - -> Patients with an illness or condition that may interfere with capacity or compliance with the study protocol, as per investigator's judgment
 - -> Treatment with any other investigational agent or participation in another clinical study with therapeutic intent within 28 days prior to randomization
- Exclusion Criteria Related to Atezolizumab:
 - -> History of severe allergic, anaphylactic, or other hypersensitivity reactions to chimeric or humanized antibodies or fusion proteins
 - -> Known hypersensitivity to biopharmaceuticals produced in Chinese hamster ovary cells or any component of the atezolizumab formulation
 - -> Oral or IV antibiotic treatment. Patients will thus need to have recovered from any infection requiring antibiotics. Patients receiving prophylactic antibiotics are eligible
 - -> Administration of a live, attenuated vaccine within 4 weeks before randomization or anticipation that such a live attenuated vaccine will be required during the study
 - -> Prior treatment with CD137 agonists or immune checkpoint blockade therapies, antiPD-1, and antiPD-L1 therapeutic antibodies
 - -> Treatment with systemic immunostimulatory agents (including but not limited to interferons, interleukin-2 [IL-2]) within 4 weeks or 5 half-lives of the drug, whichever is shorter, prior to randomization
 - -> Treatment with systemic corticosteroids or other immunosuppressive medications

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- -> Patients not willing to stop treatment with traditional herbal medicines
- Exclusion Criteria Related to Chemotherapy:
- -> Known sensitivity and contraindications to the 2 comparative chemotherapy agents (i.e. vinorelbine, oral or intravenous, and gemcitabine, intravenous)

Alter	18 Jahre und älter
Molekularer Marker	EGFR wt
Sponsor	Hoffmann-La Roche
Registrierung in anderen Studienregistern	EudraCT 2015-004105-16 ClinicalTrials.gov NCT03191786 (primäres Register)