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Analysis of time to next treatment (TTNT) in melflufen and dexamethasone (dex)-treated patients (pts) with relapsed/refractory multiple myeloma (RRMM).

Sara Brighen, Paul G. Richardson, Peter Michael Voorhees, Torben Plesner, Ulf-Henrik Mellqvist, Jeffrey A. Zonder, Brandi Nikcole Reeves, Stojan Zavisic, Johan Harmenberg, Jakob Obermüller, Pieter Sonneveld; Division of Hematology University of Torino, Torino, Italy; Dana-Farber Cancer Institute, Harvard Medical School, Boston, MA; Levine Cancer Institute, Carolinas HealthCare System, Charlotte, NC; Dept. of Hematology, Vejle Hospital, Vejle, Denmark; Borås Hospital, Borås, Sweden; Karmanos Cancer Institute, Wayne State University, Detroit, MI; Lineberger Comprehensive Cancer Center, University of North Carolina, Chapel Hill, NC; Oncopeptides AB, Stockholm, Sweden; Erasmus Medical Center Rotterdam, Rotterdam, Netherlands

Background: Melflufen is a novel peptide-conjugated alkylator potentiated by intracellular aminopeptidases, which are markedly overexpressed in MM. Melflufen + dex had encouraging activity in pts with RRMM and ≥ 2 prior lines of therapy in the phase 1/2 O-12-M1 study (overall response rate 31%; median overall survival of 20.7 mo; Richardson et al. ASH 2017. Abs. 3150). TTNT is used in Real World Evidence (RWE) to assist treatment decisions and support economic reimbursement modeling. We report TTNT after melflufen + dex in O-12-M1. **Methods:** Pts with RRMM and ≥ 2 prior lines of therapy, including bortezomib and lenalidomide (len) received 40 mg IV melflufen on d 1 of each 28-d cycle + 40 mg weekly dex until progressive disease (PD)/unacceptable toxicity. Pts were followed up for 2 y after PD, and TTNT was retrospectively reviewed for subsequent therapy. **Results:** As of 9 Nov 2017, 45 pts were treated: median age, 66 y (47-78); ISS stage II/III, 60%; high-risk cytogenetics, 44%. Pts had 4 median prior lines of therapy; 87% were refractory to last line of therapy including alkylators (24%), proteasome inhibitors (PIs; 27%), IMiDs (56%), and monoclonal antibodies (mAbs, 9%); 11% were last-line double refractory. At data cutoff, 44 pts (98%) discontinued melflufen + dex, mainly due to adverse events (40%) and PD (29%). 26 pts received subsequent therapy. Median time from start of melflufen + dex to first subsequent therapy or death, whichever occurred first, (TTNT) was 7.9 mo (95% CI: 5.7-11.0); next therapy included alkylators (27%), PIs (38%), IMiDs (58%), and mAbs (8%). **Conclusions:** Types of subsequent salvage therapy used after melflufen + dex were similar to studies of approved agents in RRMM; TTNT was also similar (Table). Further trials are ongoing, including melflufen + dex vs pomalidomide (pom) + dex in pts with RRMM refractory to len (Phase 3 OCEAN study; NCT03151811).

Drug/study	Median TTNT (mo)	Reference
Pom + dex	6.2	Rabin et al. IMW 2015
Carfilzomib-len-dex 2-4 th line	8.9	Chari et al. <i>Blood</i> . 2017; 130: 1818
Austrian RWE 3-4 th line	7.3	Willenbacher et al. <i>PLoS</i> . 2016;11: (e)0147381
Daratumumab median 4 prior lines	5.7	Lakshman et al. <i>Am J Hematol</i> . 2017;92:1146.
Melflufen + dex	7.9	

Title:

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Submitter's E-mail Address:

meganr@team9science.com

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No

Is this abstract a clinical trial?

Yes

Is this clinical trial registered?

Yes

Registry Name:

Clinicaltrials.gov

Registration Number:

NCT01897714

Research Funding Source:

Pharmaceutical/Biotech Company

Research Funding Source Name:

Oncopeptides

Are there additional sources of funding for your study?

No

Are patients still being accrued to the trial reported in this abstract?

Yes

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No

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No

Type of Research:

Prospective

Research Category:

Clinical

Continued Trial Accrual:

Yes

Received Grant funding:

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Sponsor:

Elizabeth A. Faust, PhD

First Author

Presenting Author**Corresponding Author**

Sara Bringhen, MD, PhD

Division of Hematology University of Torino

Torino,

Italy

Phone Number: +390116635814**Fax Number:** +390116963737**Email:** sarabringhen@yahoo.com**Alternate Email:** gismm2001@yahoo.com[Click to view Conflict of Interest Disclosure](#)**Second Author**

Paul G. Richardson, MD

Dana-Farber Cancer Institute, Harvard Medical School

Boston, MA

Phone Number: (617) 632-2104**Fax Number:** 617-632-6624**Email:** paul_richardson@dfci.harvard.edu[Click to view Conflict of Interest Disclosure](#)**Third Author**

Peter Michael Voorhees, MD

Levine Cancer Institute, Carolinas HealthCare System

Charlotte, NC

Phone Number: 919-966-1671**Email:** peter.voorhees@carolinashealthcare.org[Click to view Conflict of Interest Disclosure](#)**Fourth Author**

Torben Plesner, MD
Dept. of Hematology, Vejle Hospital
Vejle,
Denmark
Phone Number: +45-79406313
Email: torben.plesner@rsyd.dk

[Click to view Conflict of Interest Disclosure](#)

Fifth Author

Ulf-Henrik Mellqvist, MD, PhD
Borås Hospital
Borås,
Sweden
Email: ulf-henrik.mellqvist@vgregion.se

[Click to view Conflict of Interest Disclosure](#)

Sixth Author

Jeffrey A. Zonder, MD
Karmanos Cancer Institute, Wayne State University
Detroit, MI
Phone Number: 313-576-8730
Fax Number: 313-576-8767
Email: zonderj@karmanos.org

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Seventh Author

Brandi Nikcole Reeves, MD
Lineberger Comprehensive Cancer Center, University of North Carolina
Chapel Hill, NC
Phone Number: 507-284-2511
Email: brandi_reeves@med.unc.edu

[Click to view Conflict of Interest Disclosure](#)

Eighth Author

Stojan Zavisic
Oncopeptides AB
Stockholm,
Sweden
Email: stojan.zavisic@oncopeptides.com

[Click to view Conflict of Interest Disclosure](#)

Ninth Author

Johan Harmenberg, MD
Oncopeptides AB
Stockholm,
Sweden
Email: johan.harmenberg@oncopeptides.com

[Click to view Conflict of Interest Disclosure](#)

Tenth Author

Jakob Obermüller
Oncopeptides AB
Stockholm,
Sweden
Email: jakob.obermuller@oncopeptides.com

[Click to view Conflict of Interest Disclosure](#)

Eleventh Author

Pieter Sonneveld
Erasmus Medical Center Rotterdam
Rotterdam,
Netherlands
Phone Number: (010) 70 31 960
Email: p.sonneveld@erasmusmc.nl

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