

ARV-471, an estrogen receptor (ER) PROTAC degrader, combined with palbociclib in advanced ER+/human epidermal growth factor receptor 2 negative breast cancer: phase 1b cohort (part C) of a phase 1/2 study

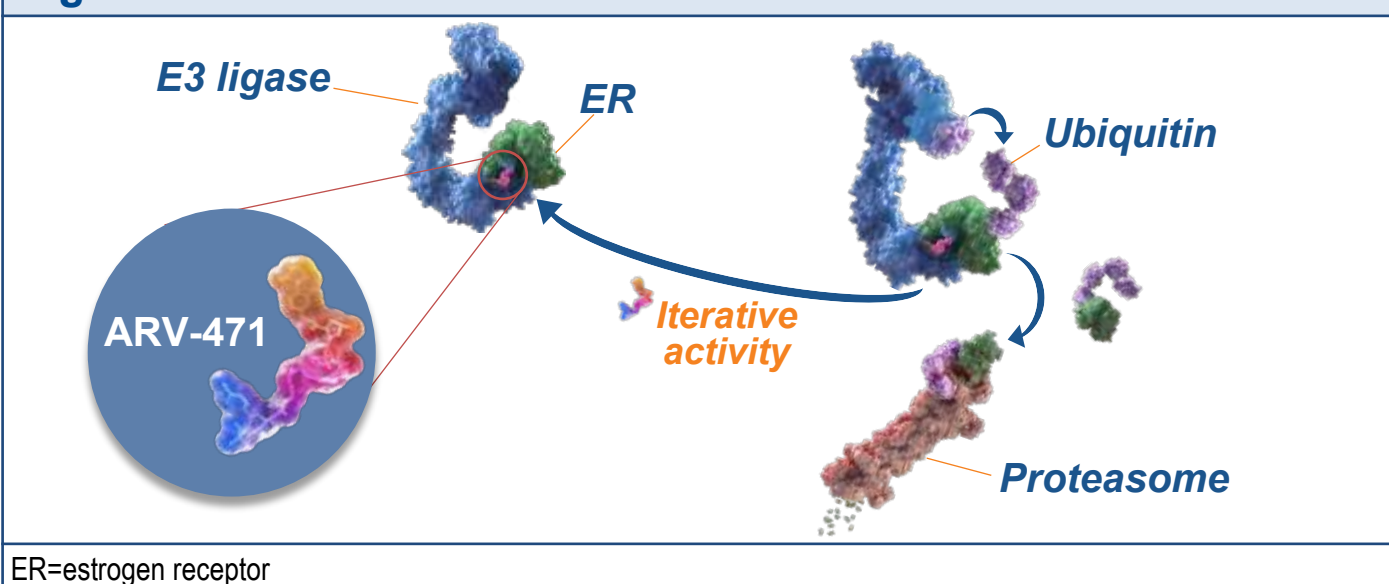
Erika P Hamilton¹, Anne F Schott², Rita Nanda³, Haolan Lu⁴, Chi F Keung⁴, Richard Gedrich⁴, Janaki Parameswaran⁴, Hyo S Han⁵, Sara A Hurvitz⁶

¹Sarah Cannon Research Institute/Tennessee Oncology, Nashville, TN; ²Rogel Cancer Center, University of Michigan Health, Ann Arbor, MI; ³University of Chicago Medicine, Chicago, IL; ⁴Arvinas, Inc., New Haven, CT; ⁵Moffitt Cancer Center, Tampa, FL; ⁶UCLA Jonsson Comprehensive Cancer Center, Los Angeles, CA

Background and Rationale

- ARV-471 is a novel, potent, orally bioavailable PROteolysis TArgeting Chimera (PROTAC) protein degrader that selectively targets the ER (**Figure 1**)
- ARV-471 degraded ER α and blocked cell proliferation in multiple ER-positive (ER+) cell lines¹
- In patient-derived xenograft breast cancer models, ARV-471 induced substantially greater ER degradation and tumor growth inhibition compared with the selective ER degrader fulvestrant¹

Figure 1: ARV-471 mechanism of action

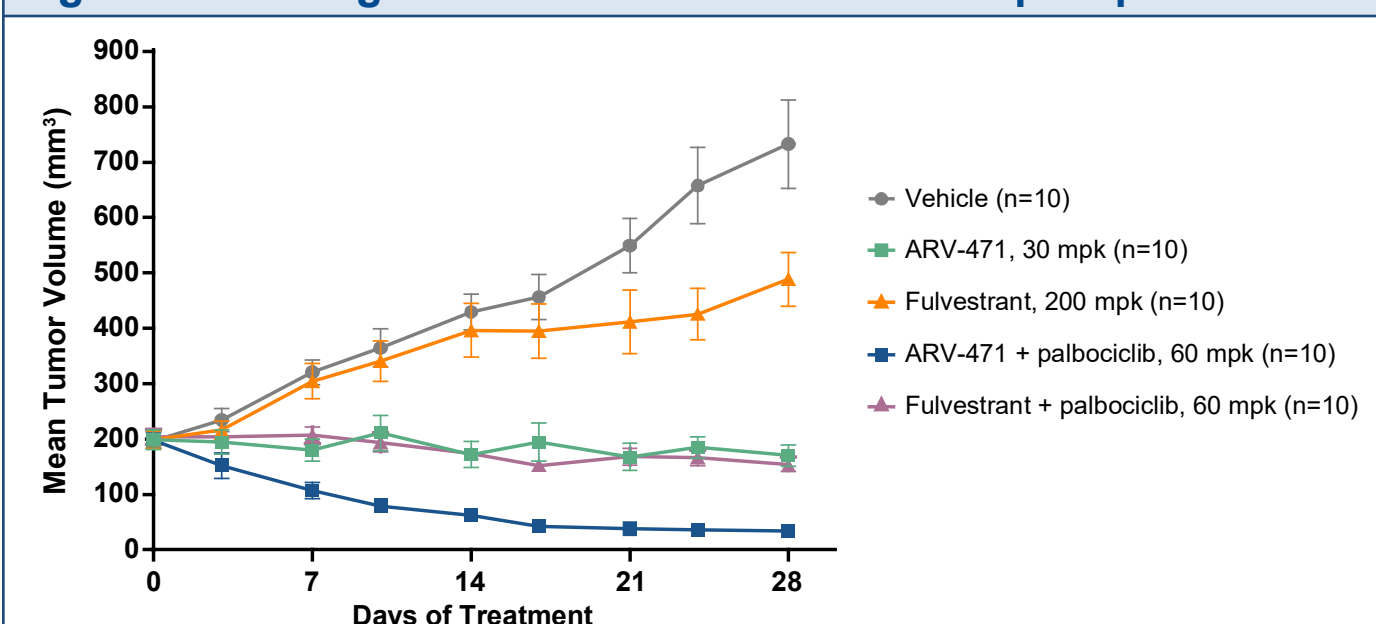


- ARV-471 is being evaluated in patients with ER+/human epidermal growth factor receptor 2 negative (HER2-) locally advanced or metastatic breast cancer in a first-in-human phase 1/2 study (**Figure 2**)

- In part A (dose escalation), ARV-471 showed a manageable safety profile in patients who had previously received endocrine therapy and a cyclin-dependent kinase (CDK) 4/6 inhibitor²
- The clinical benefit rate (rate of confirmed complete or partial response or stable disease ≥ 24 weeks) was 40% (95% CI: 26%-56%) in 47 evaluable patients
- Part B (cohort expansion; VERITAC) is further evaluating recommended phase 2 doses of ARV-471 in this patient population

- Palbociclib, a CDK4/6 inhibitor, plus fulvestrant is a standard treatment option for patients with ER+/HER2- breast cancer and disease progression on endocrine therapy
- ARV-471 plus palbociclib had substantially greater antitumor activity in a xenograft model vs palbociclib plus fulvestrant (**Figure 3**)¹

Figure 3: Tumor growth inhibition^a with ARV-471 plus palbociclib¹



Objective

- This phase 1b cohort (part C) of a phase 1/2 study (NCT04072952) is evaluating the safety and clinical activity of ARV-471 plus palbociclib in patients with ER+/HER2- breast cancer after prior endocrine therapy

Study Design

- In part C of this open-label, multicenter study, ARV-471 and palbociclib will be given orally in 28-day cycles
 - ARV-471 will be administered daily continuously
 - Palbociclib will be administered for 21 days followed by 7 days off treatment
- Eligible patients have ER+/HER2- advanced breast cancer and previous treatment with ≥ 1 prior endocrine therapy (**Table 1**); prior CDK4/6 inhibitor therapy is permitted
- Key outcomes of part C of this study are shown in **Table 2**

Table 1: Key eligibility criteria

Inclusion criteria	Exclusion criteria
<ul style="list-style-type: none"> • ≥ 18 years of age • Histologically or cytologically confirmed ER+ and HER2- advanced breast cancer • Measurable or nonmeasurable disease per RECIST criteria v1.1 • Willingness to undergo a biopsy of accessible tumor for ER IHC testing and pharmacodynamic studies ≤ 4 weeks prior to the study treatment initiation and on treatment • Women must be postmenopausal due to surgical or natural menopause • ≥ 1 prior endocrine therapy • ≤ 2 prior chemotherapy regimens for advanced disease 	<ul style="list-style-type: none"> • Known symptomatic brain metastases requiring steroids • Receipt of prior anticancer or other investigational therapy ≤ 14 days of start of treatment • Radiation therapy ≤ 4 weeks of start of treatment or prior irradiation to $>25\%$ of the bone marrow

ER+=estrogen receptor positive; HER2-=human epidermal growth factor receptor 2 negative; IHC=immunohistochemistry; RECIST=Response Evaluation Criteria In Solid Tumors

Table 2: Key outcome measures

Primary objective	Endpoints
Evaluate the safety and tolerability of ARV-471 plus palbociclib and select the RP2D and schedule of the combination	<ul style="list-style-type: none"> • Dose-limiting toxicities during the first cycle • Frequency and severity of adverse events and laboratory abnormalities
Secondary objectives	Endpoints
Assess preliminary antitumor activity of ARV-471 plus palbociclib	<ul style="list-style-type: none"> • Overall response rate per RECIST v1.1 • Clinical benefit rate^a • Progression-free survival • Duration of response
Assess pharmacokinetic parameters of ARV-471 after a single dose and after multiple doses	<ul style="list-style-type: none"> • Area under the concentration-time curve (AUC) • Maximum concentration (C_{max}) • Minimum concentration (C_{min}) • Time to maximum concentration (T_{max})

^aRate of confirmed complete or partial response or stable disease ≥ 24 weeks
RECIST=Response Evaluation Criteria In Solid Tumors; RP2D=recommended phase 2 dose

References

1. Flanagan JJ, et al. SABCs 2018. Poster #P5-04-18.
2. Hamilton E, et al. SABCs 2021. Spotlight Poster Discussion #PD13-08.

Acknowledgments

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Contact

Erika Hamilton, MD; ehamilton@tnonc.com