

# 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

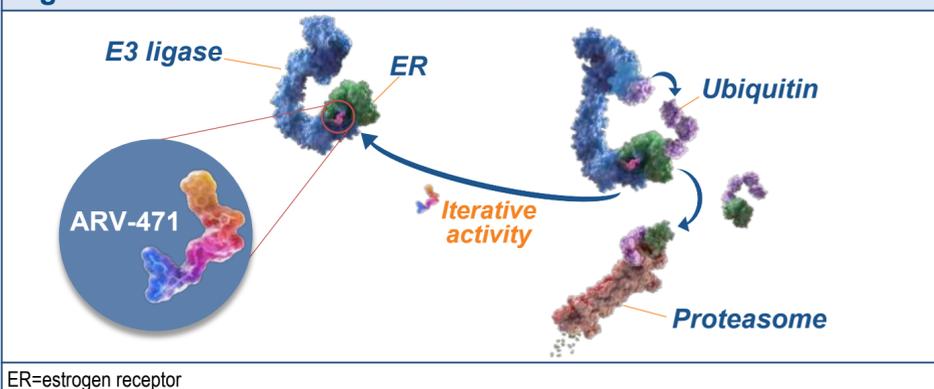
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## Background and Rationale

- 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 $\alpha$  and blocked cell proliferation in multiple ER-positive (ER+) cell lines<sup>1</sup>
- In patient-derived xenograft breast cancer models, ARV-471 induced substantially greater ER degradation and tumor growth inhibition compared with the selective ER degrader fulvestrant<sup>1</sup>

**Figure 1: ARV-471 mechanism of action**

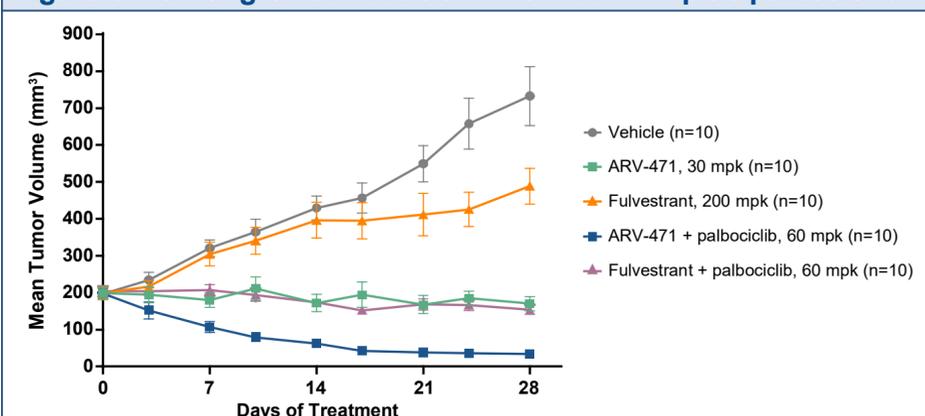


- ARV-471 is being evaluated in patients with ER+/human epidermal growth factor receptor 2 negative (HER2-) locally advanced or metastatic breast cancer in a first-in-human phase 1/2 study (**Figure 2**)

- 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 inhibitor<sup>2</sup>
- The clinical benefit rate (rate of confirmed complete or partial response or stable disease  $\geq 24$  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**)<sup>1</sup>

**Figure 3: Tumor growth inhibition<sup>a</sup> with ARV-471 plus palbociclib<sup>1</sup>**



<sup>a</sup>Orthotopic MCF7/estradiol xenograft model

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

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

<sup>a</sup>Rate of confirmed complete or partial response or stable disease  $\geq 24$  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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