

# Durable Remission and Long-Term Survival in Relapsed/Refractory (r/r) AML Patients Treated with Guadecitabine, Median Survival Not Reached for Responders after Long Term Follow up from Phase 2 Study of 103 Patients

Abstract  
# 1319

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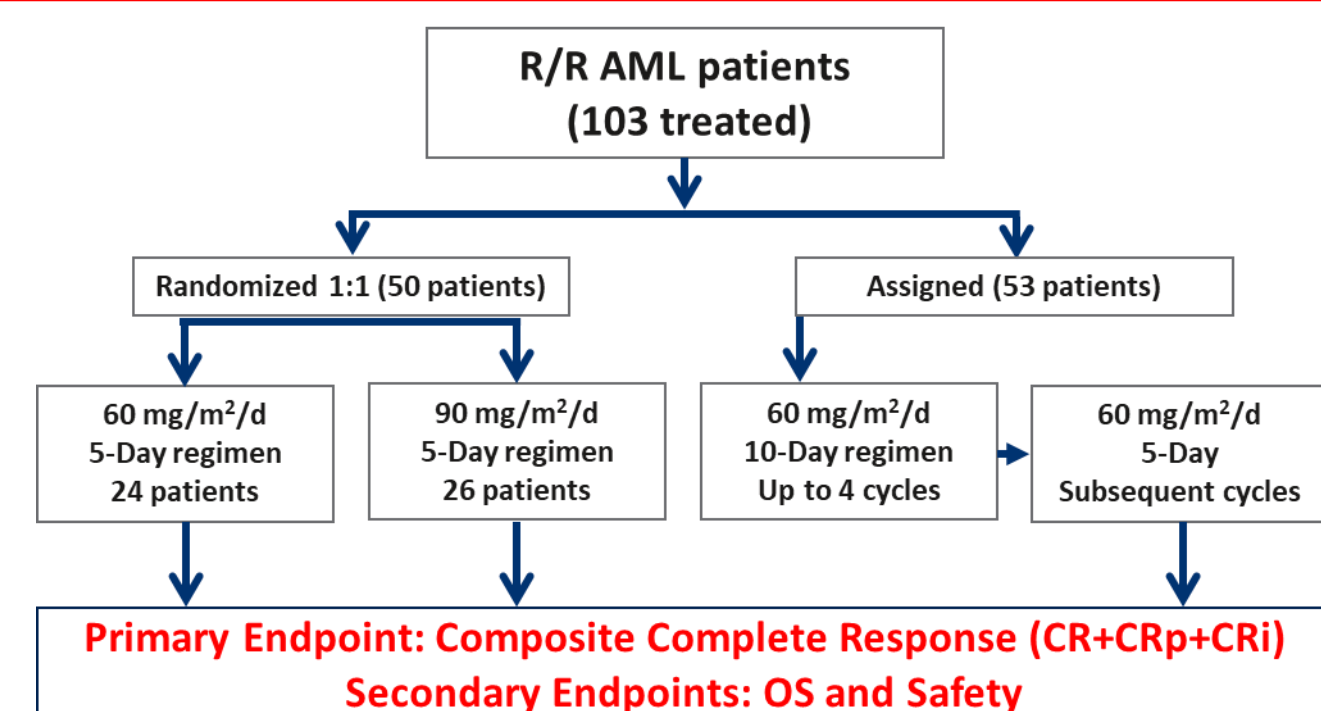
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## BACKGROUND

- Guadecitabine (G) is a next generation small volume Subcutaneous (SC) hypomethylating agent (HMA) resistant to degradation by cytidine deaminase resulting in prolonged in vivo exposure to its active metabolite decitabine
- In a Phase 2 Study of r/r AML, Guadecitabine was administered to 103 patients using different doses and schedules
- Primary results were published by Roboz et al, 2018 with the best results using 10-day regimen of 60 mg/m<sup>2</sup> for 10 days initially then 5-day regimen in later cycles (CR rate of 19% and CRc rate of 30%, and median OS of 7.1 months)
- Here we present the duration of response and overall survival (OS) after long term follow up (median follow up of ~ 2.5 years).

## METHODS

**Figure 1. Guadecitabine Phase 2 in r/r AML Study Design and Patient Disposition**



## RESULTS

**Table 1: Guadecitabine in r/r AML (N=103 patients) Patients' Characteristics**

Characteristic		N (%)
Age (y)	Median [range] (>60 years)	60 [22-82] (52 (50%))
ECOG PS 0-1		89 (86%)
Cytogenetics		
Poor		42 (41%)
Intermediate	Diploid	21 (20%)
	Miscellaneous	31 (30%)
Prior HCT		19 (18%)
Prior Number of Rx Regimens	Median [range]	2 (1-10)
	1	27(26%)
	2	31(30%)
	3-5	39(38%)
	>5	2(2%)
Response to First Induction	CR	55 (53%)
	Primary Refractory	48 (47%)
Baseline BM Blasts	Median [range]	33% (2-95%)
	>40%	42 (41%)

**Table 2. Guadecitabine in r/r AML Clinical Responses**

Response Category	Response rate (N=50) 5 Day (60 and 90 mg/m <sup>2</sup> ) N (%)	Response rate (N=53) 10 Day (60 mg/m <sup>2</sup> ) N (%)	P value
CR	3 (6%)	10 (19%)	<b>0.074</b>
CRp	1 (2%)	4 (7%)	
CRi	4 (8%)	2 (4%)	
CRc (CR + CRp + CRi)	8 (16%) (95% CI: 7, 29%)	16 (30%) (95% CI: 18, 44%)	<b>0.106</b>

Trend of higher CR and CRc with the 10-Day regimen

## RESULTS

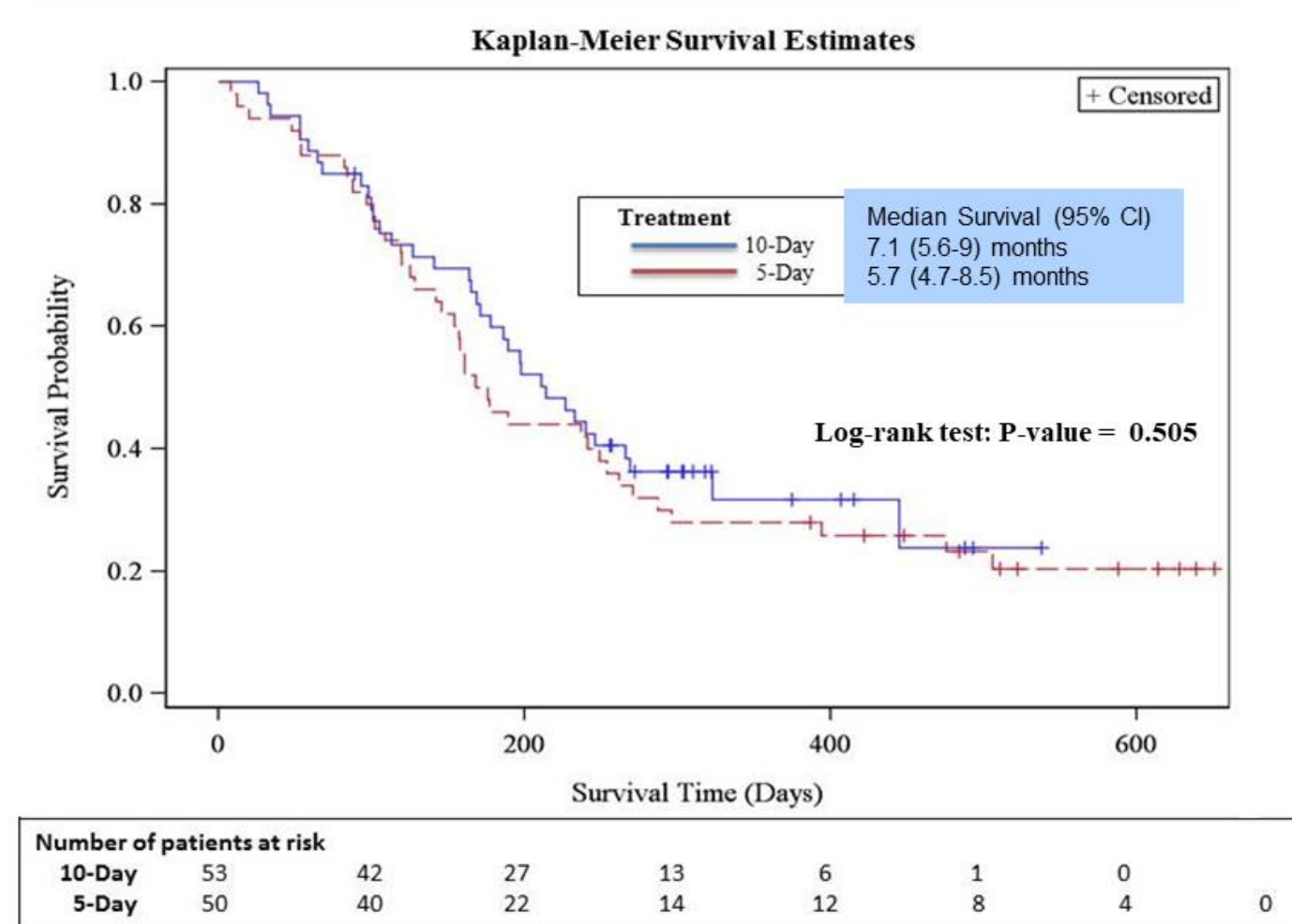
**Table 3. Follow Up, Treatment Exposure, and Duration of Response**

	Median (Range)
Follow Up	29.2 (25-32) months
Number of Cycles	3 (1-29) Cycles
Complete Response (CR) duration of Response	7 (1-29.5) months
CR composite (CR+CRp+CRi) duration of response	7.8 (0.5-30) months

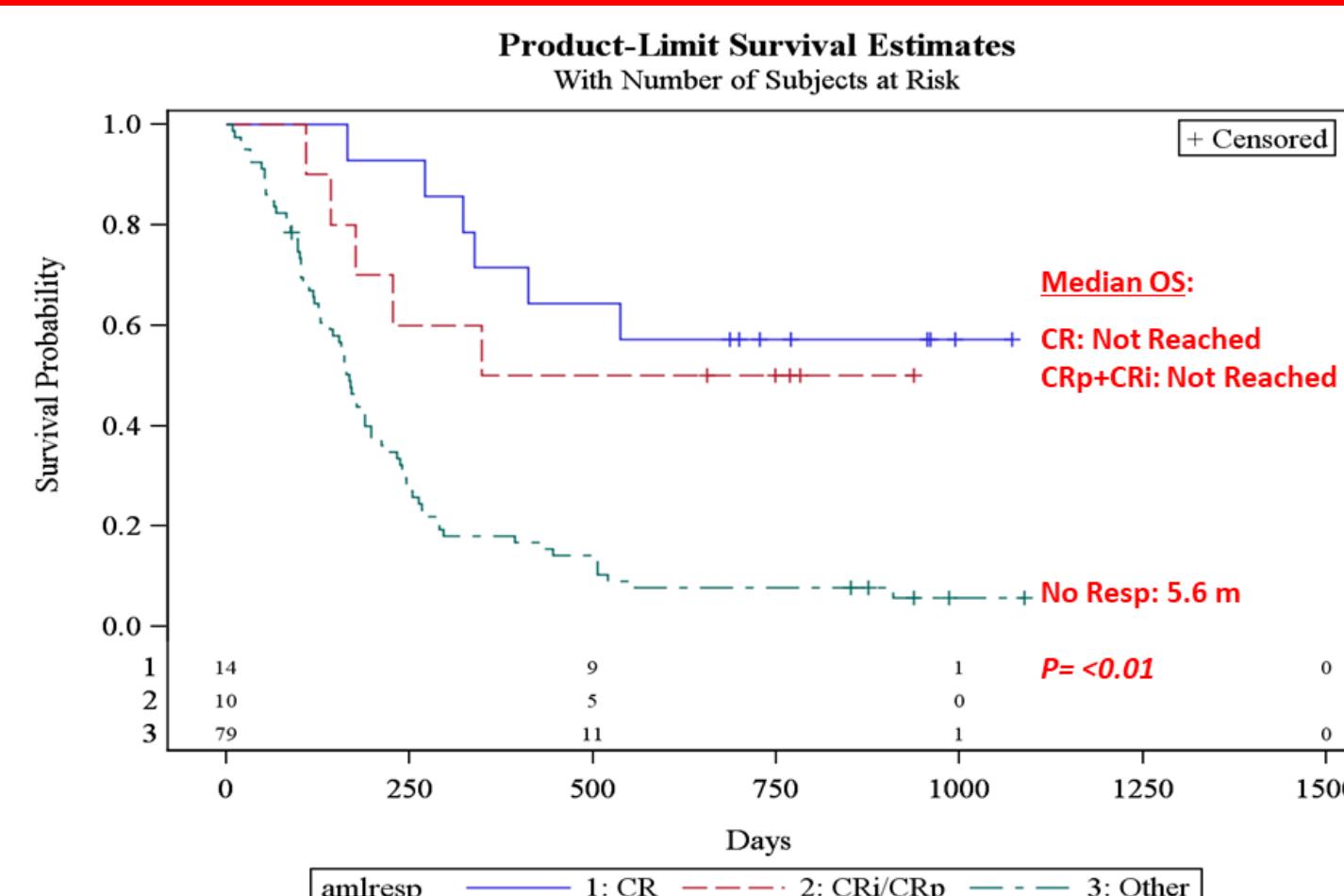
**Table 4. Guadecitabine in r/r AML Clinical Response (CRc) in Major Subgroups**

Parameter	Category	N (%)	CRc N (%)
Age	<65	63 (61%)	12 (19%)
	≥65	40 (39%)	12 (30%)
ECOG PS	0-1	89 (86%)	23 (26%)
	2	14 (14%)	1 (7%)
Cytogenetics	Adverse	42 (41%)	8 (19%)
	Diploid	21(20%)	4(19%)
	Others	40 (39%)	12 (30%)
Prior HCT	Yes	19 (18%)	5 (26%)
	No	84 (82%)	19 (23%)
Response to induction	Refractory	48 (47%)	12(25%)
	CR	55 (53%)	8(15%)
Time from Last Therapy	< 6 months	82 (80%)	18 (22%)
	≥ 6 months	20 (19%)	6 (30%)

**Figure 2: Guadecitabine Overall Survival in r/r AML by Regimen**

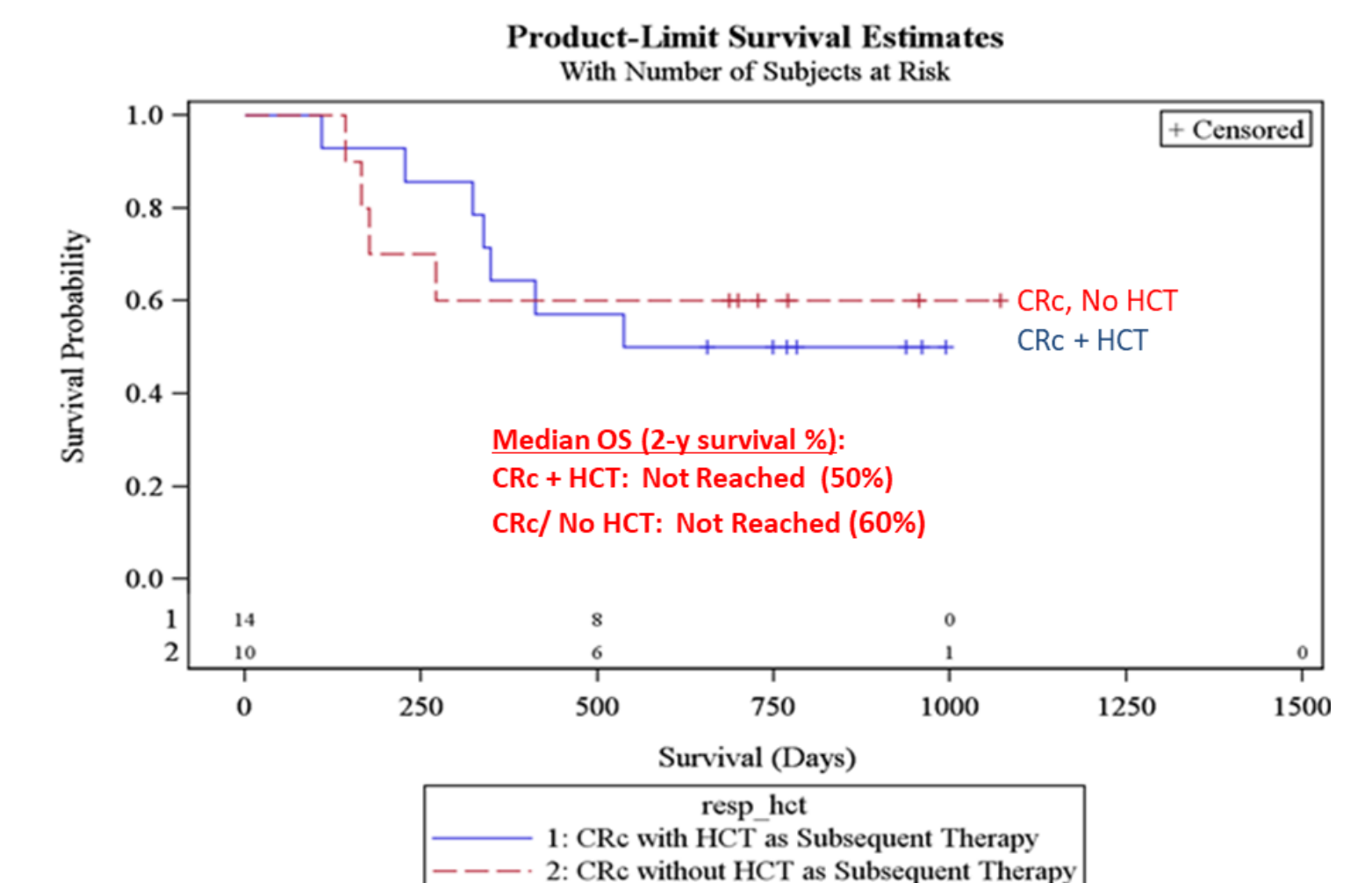


**Figure 3: Guadecitabine Overall Survival in r/r AML by Response**



## RESULTS

**Figure 4: Guadecitabine Overall Survival in r/r AML Responders (CRc) with and without Hematopoietic Cell Transplant (HCT)HCT**



**Table 5: Safety of Guadecitabine in r/r AML AEs Gr ≥3 Regardless of Relationship (N=103 patients)**

Adverse Event	N (%)	All Cause Early Mortality
Febrile Neutropenia	62 (60%)	30-Day: 4 (3.9%)
Pneumonia	37 (36%)	60-Day: 12 (11.7%)
Thrombocytopenia	37 (36%)	
Anemia	32 (31%)	
Neutropenia	20 (19%)	
Sepsis	16 (16%)	

## SUMMARY/CONCLUSIONS

- Guadecitabine treatment in r/r AML resulted in CRc in 30% of patients treated with the 10-day regimen, and 16% in patients with the 5-day regimen. Overall, CRc was achieved in 24/103 patients or 23% overall
- Responses were observed in several poor prognostic groups (refractory disease, prior HCT, and adverse cytogenetics)
- After a median follow up of approximately 2.5 years, median OS was not reached for 24 patients who achieved CRc
- The 2-year survival rate of r/r AML patients who responded (CRc) was 60% without subsequent HCT, and 50% with subsequent HCT
- Guadecitabine treatment in r/r AML results in durable responses and long-term survival in responding patients that exceeds duration of response

## REFERENCES

- Roboz G J, Kantarjian HM, Yee KW, et al. Cancer 2018; 124: 325-334

**Conflict-of-interest statement:**  
Griffiths: consultancy: Celgene, Inc., Appellis, Abbvie, Genentech, New Link Genetics, Astex, Otsuka, Novartis, Boston Scientific, Persimmon, Partner Therapeutics; Research funding: Celgene, Appellis, Genentech, New Link Genetics, Astex, Otsuka, Novartis, Partner; PI on clinical trial: Appellis, Oncanova, Abbvie, Kantarjian; Research funding: Daiichi-Sankyo, Jazx Pharma, Cyclacel, Pfizer, Ariad, Abbvie, Agios, Novartis, Immunogen, Astex, BMS, Amgen, Honoraria: Pfizer, Actinium, AbbVie, Agios, Amgen; BOD/advisory committee: Actinium, Takeda, O'Connell; Research funding: Astex, Genentech; BOD/advisory committee: BMS, Shionogi, Astex, Pfizer; Yee: Research funding: Astex, Hoffman La Roche, Celgene, Novartis, MedImmune, Merck, Millennium; Honoraria: Celgene, Novartis, Pfizer; BOD/advisory committee: Celgene, Novartis, Takeda, Pfizer, Astellas; Stock: Honoraria: Research to Practice, UpToDate; BOD/advisory committee: Astellas, Daiichi, Pfizer, Kite, Agios, Daver; Consultancy, Research funding & honoraria: Genentech, Abbvie, Astellas, Daiichi-Sankyo, BMS, Pfizer, Servier, Immunogen; Jabbour: Consultancy: Takeda, BMS, Adaptive, Amgen, Abbvie, Pfizer; Research funding: Takeda, BMS, Adaptive, Amgen, Abbvie, Pfizer, Cyclacel, Ritchie; Consultancy: Celgene, Incyte, Novartis, Pfizer; Research funding: Astella, Bristol-Myers Squibb, Novartis, NS Pharma, Pfizer, Jazx; Advisory board: Genentech, Celgene, Pfizer, Agios, Tolero; Speakers bureau: Ariad, Celgene, Incyte, Novartis; Travel Support: Celgene, Novartis, Pfizer; Rizzieri: Consultancy: AROG, Bayer, Celgene, Celltrion, Mustang, Pfizer, Seattle Genetics, Stemline; Research funding: Stemline; Advisory board: Abbvie, Agios, AROG, Bayer, Celgene, Gilead, Jazx, Novartis, Pfizer, Sanofi, Seattle Genetics, Stemline, Teva; Speaker: Celgene, Gilead, Seattle Genetics, Stemline; Su: Astex employment; Azab: Astex employment; Roboz: Consultancy: Pfizer, Roche/Genentech, Sandoz, Takeda, Trovogene, Celgene, Bayer, Orsenix, Astellas, Astex, AbbVie, Actinium, Amphivena, Agios, MEI Pharma, Novartis, Jazx, Janssen, Daiichi Sankyo, Celltrion, Eisai BOD/advisory committee: Otsuka, Pfizer, Roche/Genentech, Sandoz, Takeda, Trovogene, Celgene, Bayer, Orsenix, Astellas, Astex, AbbVie, Actinium, Amphivena, Agios, MEI Pharma, Novartis, Jazx, Janssen, Daiichi Sankyo, Celltrion, Eisai. There are no relationships to disclose for: Issa, Walsh, and Lunin

