ATEZOLIZUMAB + OBINUTUZUMAB + VENETOCLAX IN PATIENTS WITH RELAPSED OR REFRACTORY FOLLICULAR LYMPHOMA: PRIMARY ANALYSIS OF A PHASE 2 TRIAL FROM LYSA


Introduction: Relapsed and refractory (R/R) Follicular Lymphoma (FL) treatment remains challenging. Atezolizumab (ATE) and obinutuzumab (OBI) are monoclonal antibodies acting respectively to inhibit T-cell lymphocyte exhaustion or by inducing lymphoma cells cytotoxicity, whereas venetoclax (VEN) is a small molecule inhibiting BCL-2. Combining tumor-targeted therapies with agents that enhance anti-tumor immunity represents an attractive treatment paradigm. This LYSA sponsored multicenter phase 2 trial (NCT03276468) evaluated ATE, OBI and VEN combination in R/R B-cell lymphomas. Herein, we present primary efficacy and safety data from the FL cohort.

Methods: Patients ≥18 years with biopsy-confirmed R/R FL who failed at least one line of therapy were eligible. OBI was given IV at 1 g on day (D) 1, 8 and 15 of cycle (C) 1 and on D1 from C2 to C8 every 3 weeks. ATE was given IV, 1.2 g every 3 weeks, started at D2 of C1, then administered at D2 of each cycle for 24 cycles. VEN was given orally at 800 mg/D at full dose, starting on D8C1 for 24 cycles. The primary endpoint was the Overall Response Rate (ORR) evaluated by best of Response Rate (BOR) was 80.4% [69.6%-88.6%] including 35.7% of CMR. To date, 23 patients relapsed after an initial response (51% of the 45 responders). Thirty-seven patients (63%) received the full induction treatment. At the time of analysis, a median of 8 cycles (1-8) has been administered. A total of 41 (70.7%) patients experienced grade 3-4 adverse event (AE) and 1 had an AE that led to discontinuation of any drug. AE of grade 3 or more reported in at least 10% of patients were neutropenia (41.4%), thrombocytopenia (24.1%) and lymphopenia (22.4%). Of note, two patients experienced autoimmune colitis (grade 2 and 3) and one patient experienced a grade 2 immune-related pancreatitis during induction.

Conclusion: ATE, OBI and VEN combo appears to be well tolerated, with no unexpected toxicity brought by the combination. The ORR at EOI seems to be comparable to other innovative regiments in this setting, with durable responses to date.

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POLATUZUMAB VEDOTIN + OBINUTUZUMAB + VENETOCLAX IN PATIENTS WITH RELAPSED/REFRACTORY (R/R) FOLLICULAR LYMPHOMA (FL): PRIMARY ANALYSIS OF A PHASE 1B/2 TRIAL


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