Clinical Program for Cervical Cancer

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Cervix Cancer Education Symposium, January 2019, South Africa

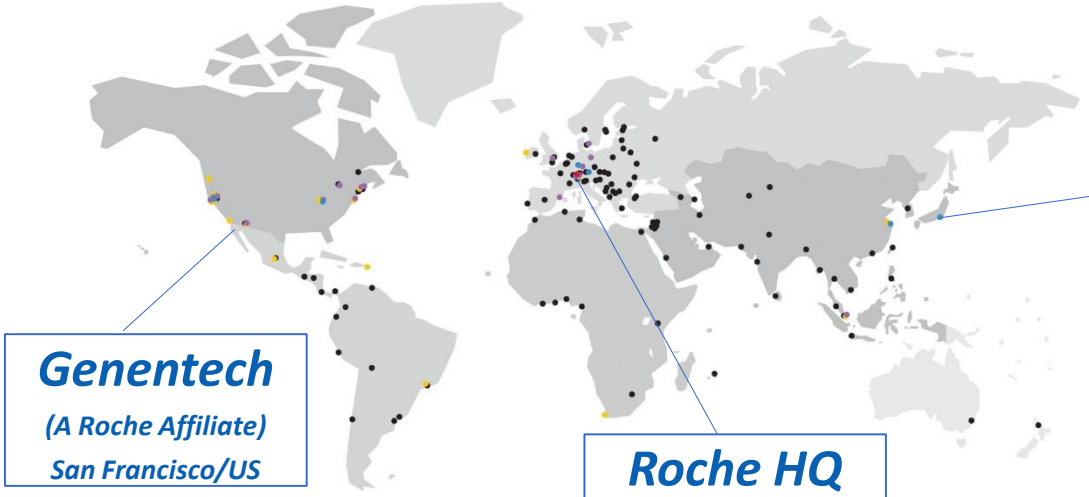
Who we are?

GYNECOLOGIC CANCER INTERGROUP

An Organization of International Cooperative Groups for Clinical Trials in Gynecologic Cancers

Roche is a global pioneer in personalized healthcare.

We work across diagnostics and pharmaceuticals.



Chugai Pharma
(A Roche Affiliate)
Tokyo/Japan

Genentech
(A Roche Affiliate)
San Francisco/US

Roche HQ
Basel/Switzerland

30 *Pharmaceuticals & Diagnostics R&D sites worldwide*

26 *Manufacturing sites worldwide*

Innovation is in our DNA

We advance science to improve people's lives since 1896. A strong track record contributing to scientific progress

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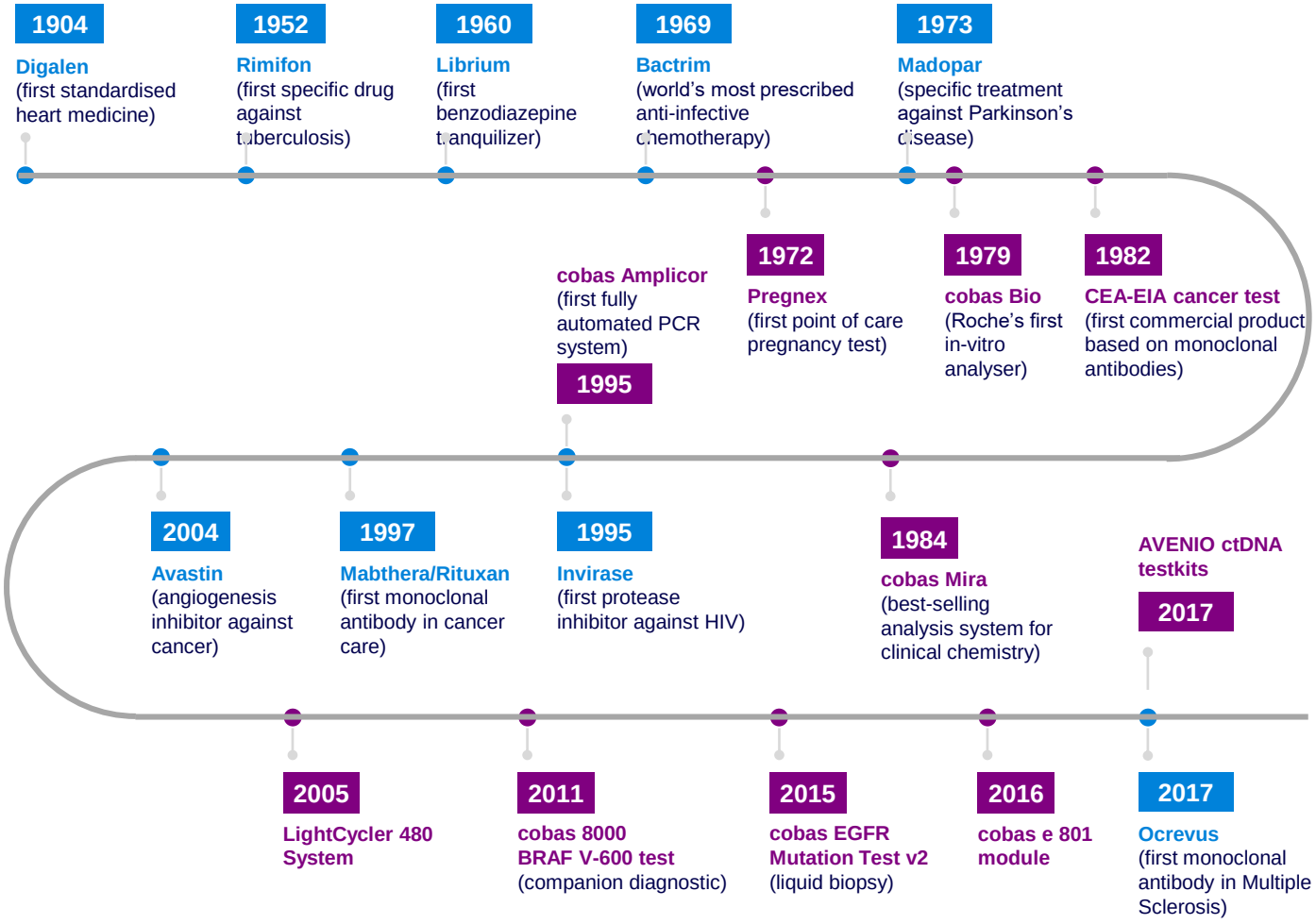
Pharma milestones

Diagnostic milestones



44 *Prix Galien for pharmaceutical research since 1974*

3 *Nobel prizes*

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High unmet medical need in GYN Cancers Worldwide

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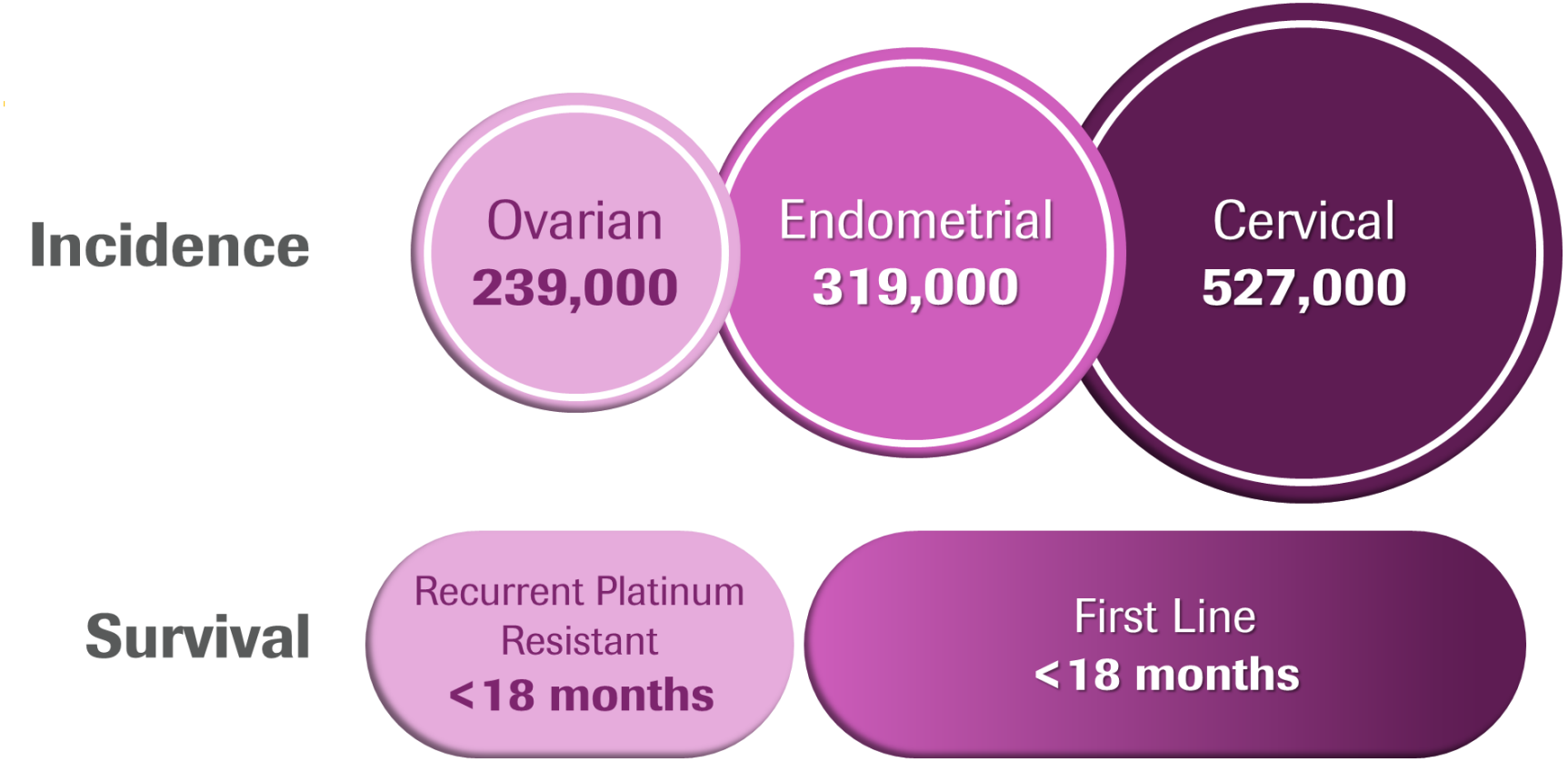

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Roche: Improving GYN Clinical Practice for more than 7 Years

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Gynaecological Oncology

Ovarian Cancer

2011
FL OC
GOG-0218 & **ICON7**

2012
PS OC
OCEANS

2014
PR OC
AURELIA

2016
PS OC
GOG-0213 & **OCEANS**

2018
FL OC
GOG-0218

PS OC
MITO16b* PFS

PR OC
AGO-2.21*

Cervical Cancer

2014-2015
1L CC
GOG-0240

2019
2L CC
CECILIA

2019+
1L CC
BEATcc

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Progress in current treatment approaches for advanced cervical cancer made by GOG-0240

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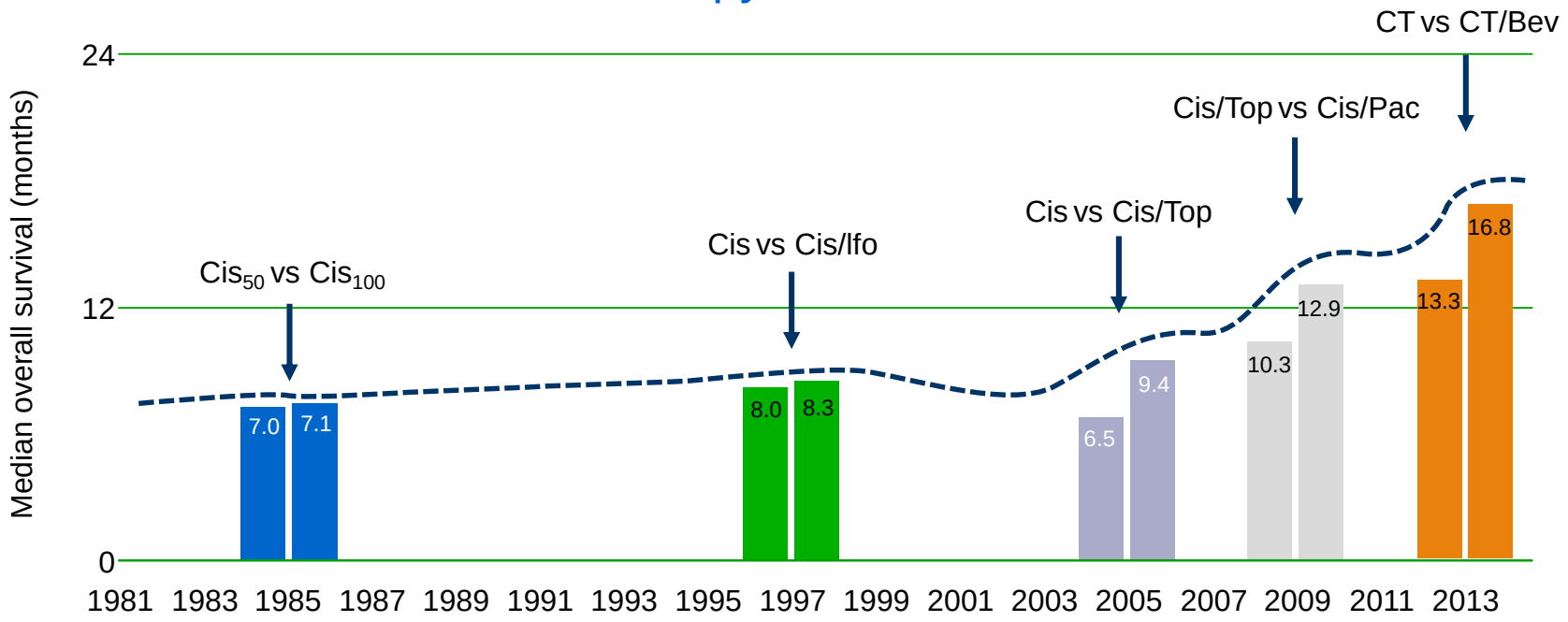
Phase III studies of chemotherapy in advanced cervical cancer[1]



GOG-0240

- Bev, bavacizumab; Cis, cisplatin;CT, chemotherapy; Ifo, ifosfamide; Pac, paclitaxel; Top, topotecan

1. Adapted from Penson RT. SGO 2015.

CECILIA: Rationale

- Bevacizumab approval in cervical cancer was based on GOG-0240 study[1]
- The safety of bevacizumab plus carboplatin/paclitaxel has been established in phase III trials in ovarian cancer[2,4] and NSCLC[5,6]
- GOG-0240 showed a higher incidence of fistulae compared with previous clinical trials of bevacizumab-containing therapy[1]
  - Incidence of GI-vaginal fistulae: 8.3% vs 0.9%; similar incidences of GI and GU fistulae[1]
  - Possible association between prior pelvic radiation and GI-vaginal fistulae[2]
- Higher risk of GI perforation with beva–containing therapy vs chemotherapy alone[1–3]

CECILIA has therefore been designed to:

1. Generate data on bevacizumab plus carboplatin/paclitaxel in cervical cancer
2. Focus on the incidence of GI perforations/fistulae, GI-vaginal and GU fistulae

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1. Tewari K, et al. NEJM 2014; 2. Burger RA, et al. NEJM 2011; 3. Willmott LJ, et al. IGCS 2014
4. Perren TJ, et al. NEJM 2011; 5. Sandler A, et al. NEJM 2006; 6. Zinner J, et al. J Thorac Oncol 2015;.

CECILIA (MO29594): trial design

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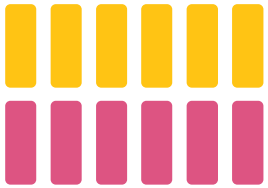
A MULTICENTRE OPEN-LABEL SINGLE-ARM PHASE II STUDY EVALUATING THE SAFETY AND EFFICACY OF BEVACIZUMAB IN COMBINATION WITH CARBOPLATIN AND PACLITAXEL IN PATIENTS WITH METASTATIC, RECURRENT OR PERSISTENT CERVICAL CANCER

Metastatic, recurrent or persistent cervical cancer patients
not amenable to curative treatment with surgery and/or radiation therapy

n=150



Carboplatin AUC5 q3w*

Paclitaxel 175mg/m² q3w*

Bevacizumab 15mg/kg q3w

Until disease progression, unacceptable toxicity or withdrawal of consent

- **Primary endpoint:** safety (incidences of GI perforation/fistula, GI-vaginal fistula and GU fistula)
- Exclusion criteria designed to minimize risk of GI-vaginal fistula

AUC, area under the concentration curve; q3w, every 3 weeks
*Minimum of 6 cycles, unless toxicity necessitates discontinuation of one or both chemotherapy agents, in which case non-implicated drug(s) and bevacizumab can be continued alone

CECILIA study protocol

CECILIA (MO29594): Countries

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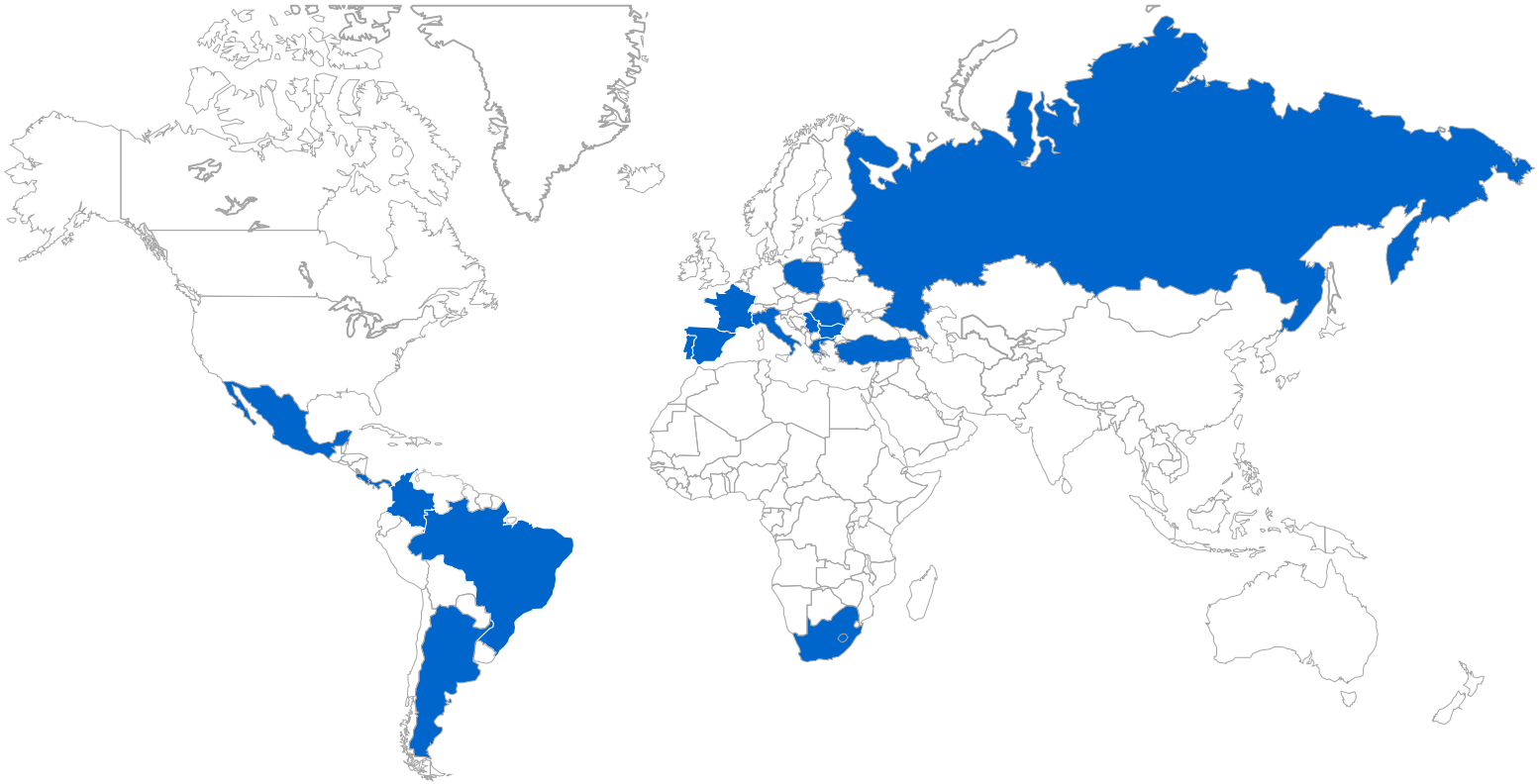

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CECILIA Preliminary Results (presented at ASCO 2018)

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Primary endpoint events

Endpoint event	No. of patients (%) [95% CI]
GI perforation/fistula	6 (4.0) [1.5–8.5]
GI–vaginal fistula	6 (4.0) [1.5–8.5]
GU fistula	6 (4.0) [1.5–8.5]
Total	**15 (10.0%) [5.7–16.0][a]**

- The fistula/GI perforation incidence was consistent with that reported in GOG-240.
- Preliminary results suggests that the combination of bevacizumab with carboplatin and paclitaxel is a feasible 1st-line treatment for metastatic, recurrent, or persistent cervical cancer

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Redondo A et al, Preliminary Results from CECILIA, an open-label global safety study of bevacizumab, carboplatin and paclitaxel therapy for metastatic, recurrent or persistent cervical cancer. ASCO 2018 Annual Meeting. Poster #5528

Roche commitment to Cervical Cancer

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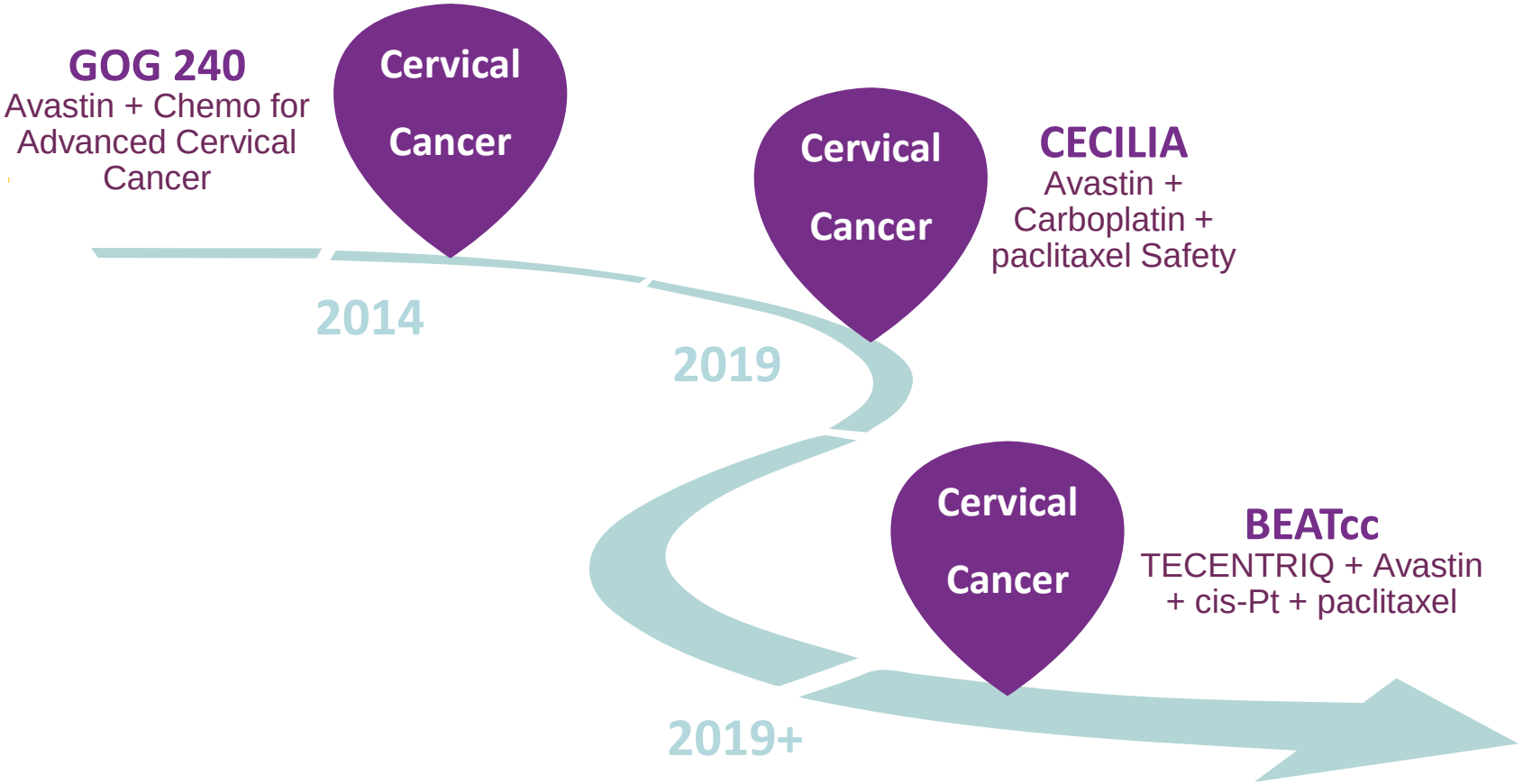
What's Next



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