



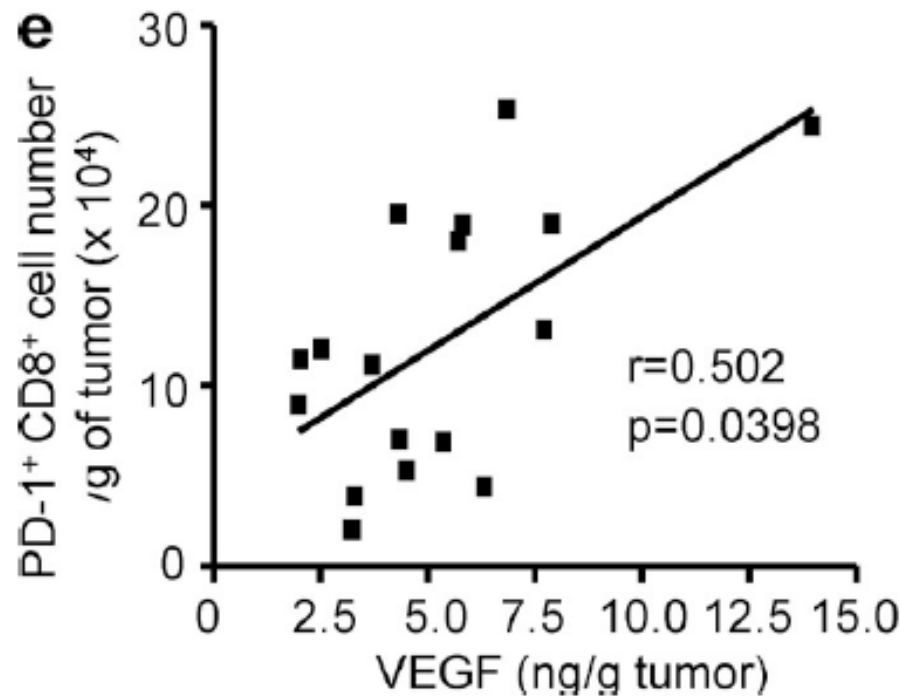
ATEzolizumab and AVastin in LAte recurrent disease ENGOT-ov29-GCIG

A randomized, double-blinded, phase III study of atezolizumab versus placebo in patients with late relapse of epithelial ovarian, fallopian tube, or peritoneal cancer treated by platinum-based chemotherapy and bevacizumab

Sponsor: ARCAGY-GINECO
Lead group: GINECO (Pr JE Kurtz)

Rational for combining of anti-PDL-1 with anti-VEGF therapy

VEGF expression is correlated with expression of PD1 on CD8+ cells



Rational for combining of anti-PDL-1 with anti-VEGF therapy

*VEGF exerts an immunosuppressive effect
in cancer*

- **Inverse correlation between VEGF levels and presence of TILs**

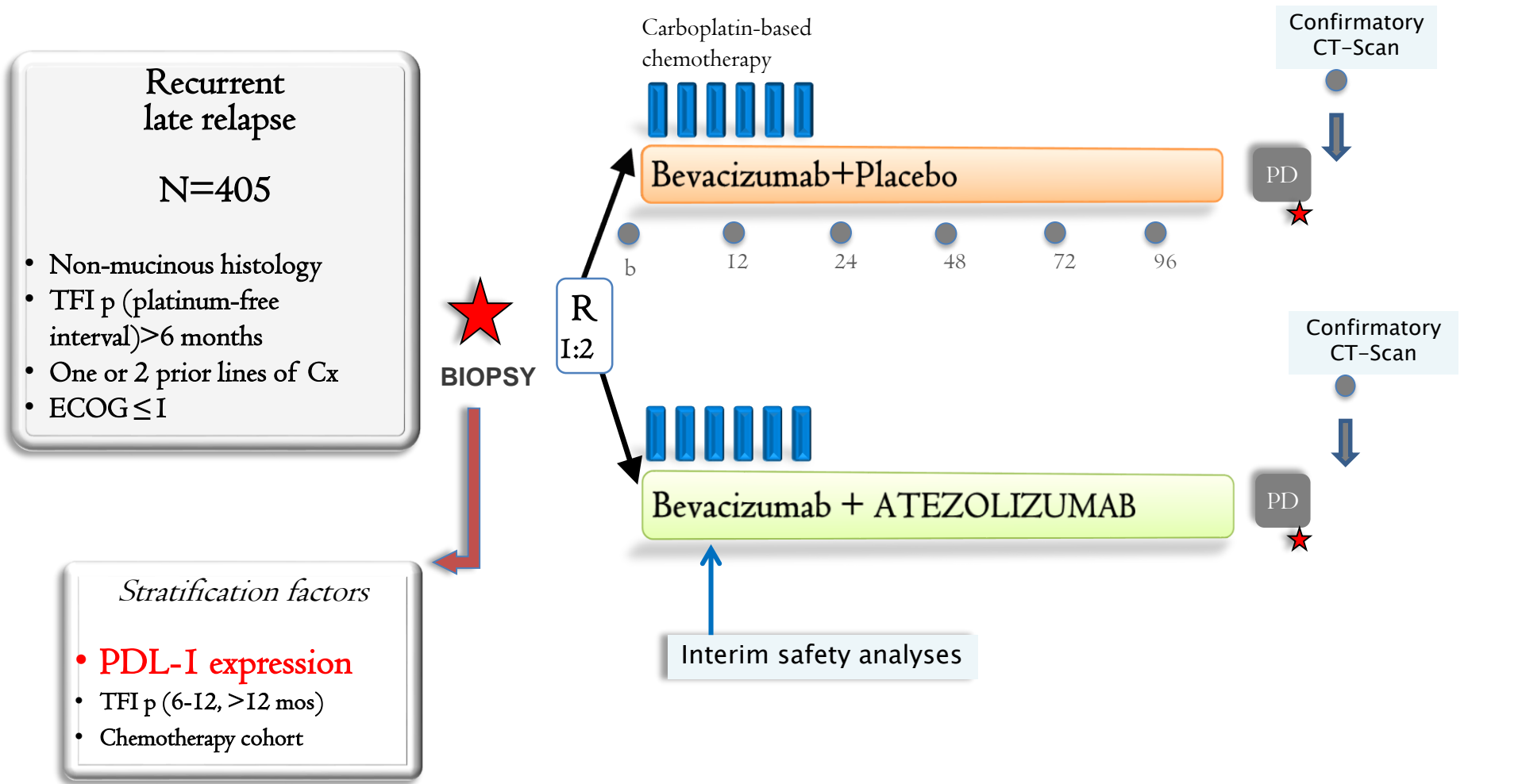
Zhang L et al N Engl J Med 2003;348:203-13.

- VEGFR2 is selectively expressed in Treg CD4+FoxP3 + cells and VEGF directly **suppresses activation of T Cells**

H. Suzuki Eur J of Immunology, vol. 40, no. 1,2010; Gavalas NG et al British Journal of Cancer (2012) 107, 1869

- **In response to VEGF, immature DCs** acquire a pro-angiogenic phenotype and contribute to ovarian cancer progression

Coukos G Br J Cancer. 2005;92:1182–1187.



Chemotherapy-based schedule options (investigator's choice): carboplatin AUC5 + paclitaxel (175mg/m² q3wks) or gemcitabine* (1000 mg/m² D1&D8 q3wks) or PLD* (30mg/m² q 4wks). BEV 15mg/kg q3 wks or 10mg/kg q2 wks. ATEZO/PLACEBO: 1200mg, I.V q3wks or 800mg q2wks.

objectives

- **Primary: efficacy**

- RECISTv1.1 **PFS1** from median of 13 to 18.6 months (HR: 0.70) alpha:0.05, beta:0.8, two-sided with landmark CT-scans/MRI at 12, 24, 48, 72 and 96 weeks

- and **supported by secondary endpoints:** TSST and QoL + PROs (EORTC QLQ-30 and OV28); OS

Others secondary objectives

1- **Additional efficacy assessments in the ITT population**

- ORR
- PFS1 as assessed per irRECIST
- Time from randomization to first subsequent therapy or death (TFST)
- PFS2

2- **Efficacy between arms in the PD-L1-ve and PD-L1 +ve subgroups**

3- **Safety and tolerability** of atezolizumab compared to placebo

4- Impact of treatment and disease on **resource use** (EQ-5D)

timelines

- **FPI: Q3 2016**
- **Accrual period: 24 months**
- **LPI: Q2 2018**
- **Follow-up period: 20 months**