

## **KURZPROTOKOLL** **Neobil AIO-HEP-0120**

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| <b>Öffentlicher Titel</b>   | Phase II Studie zu Bintrafusp Alfa bei resezierbarem Gallengangskarzinom   |
| <b>Wissenschaftl. Titel</b> | Neoadjuvant Bintrafusp Alfa in Patients With Resectable Biliary Tract Cancer (NEOBIL)  |
| <b>Kurztitel</b>            | Neobil AIO-HEP-0120  |
| <b>Studienart</b>           | multizentrisch, prospektiv, Therapiestudie, offen/unverblindet, einarmig, Investigator Initiated Trial (IIT)   |
| <b>Studienphase</b>         | Phase II   |
| <b>Erkrankung</b>           | Verdauung: Gallengangs-/Gallenblasenkrebs (maligne biliäre Tumoren): neoadjuvant   |
| <b>Einschlusskriterien</b>  | <ul style="list-style-type: none"><li>- Written informed consent granted prior to initiation of any study-specific screening procedures</li><li>- Biliary tract cancer, confirmed by histopathology, cytopathology is not sufficient</li><li>- Resectable disease limited to the liver assessed by an interdisciplinary tumor board involving a hepatobiliary surgeon</li><li>- Subject is willing and able to comply with the protocol for the duration of the study including undergoing treatment and scheduled visits and examinations including follow up</li><li>- Age <math>\geq</math> 18 years</li><li>- Performance status ECOG 0-1</li><li>- Normal organ and bone marrow function defined as: o Hematopoetic: absolute neutrophil count <math>\geq</math>1,500/mm<sup>3</sup>, platelet count <math>\geq</math> 100,000/mm<sup>3</sup>, o Hemoglobin <math>\geq</math>9 g/dL o Normal international normalized ratio (INR), PT <math>\leq</math> 1.5 x ULN and activated partial thromboplastin time (aPTT) <math>\leq</math> 1.5 x ULN o Hepatic: AST <math>\leq</math>5 x ULN, ALT <math>\leq</math> 5 x ULN, and bilirubin <math>\leq</math> 3.0 x ULN o Renal: Creatinine level <math>\leq</math>1.5 x ULN or estimated creatinine clearance <math>\geq</math> 30 mL/min according to the Cockcroft-Gault formula (or local institutional standard method)</li><li>- Special medical conditions and comorbidities: o Maximum Child Pugh stage A in patients with cirrhosis o HIV: stable on ART for at least 4 weeks, no documented evidence of multi-drug resistance, viral load of <math>&lt;</math> 400 copies/mL and CD4+ T-cells <math>\leq</math> 350 cells/<math>\mu</math>L o HBV infection: participant on a stable dose of antiviral therapy, HBV viral load below the limit of quantification.</li><li>- Women of childbearing potential must have a negative serum or highly sensitive urine pregnancy test performed within 7 days prior to the first dose of IMP</li><li>- Women of childbearing potential (WOCBP) must use HIGHLY EFFECTIVE method(s) of contraception to avoid pregnancy for the duration of study treatment and further 2 months after the last dose of IMP</li></ul> |
| <b>Ausschlusskriterien</b>  | <ul style="list-style-type: none"><li>- Metastatic disease</li><li>- Prior surgery, systemic therapy, radiation therapy, chemoradiation, transarterial chemoembolisation (TACE), Radiofrequency ablation (RFA) or selective intraarterial Radiotherapy (SIRT) for treatment of CCA. NOTE: Laparoscopy for diagnostic procedures is allowed</li><li>- Drug or alcohol addiction, medical or psychological condition that may interfere with the patient's participation in the study</li><li>- Participation in another clinical trial with any investigational study drug (whatever the use, curative, prophylactic or diagnostic intent) within 30 days prior to enrollment</li><li>- Pregnancy or breast feeding women</li><li>- Regulatory and ethical criteria: Patient who has been incarcerated or involuntarily institutionalized by court order or by the authorities [§ 40 Abs. 1 S. 3 Nr. 4 AMG]. Patients who are unable to consent because they do not understand the nature, significance and implications of the clinical trial and therefore cannot form a rational intention in the light of the facts [§ 40 Abs. 1 S. 3 Nr. 3a AMG]</li></ul>   |

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- IMMUNOSUPPRESSANTS: "Current use of immunosuppressive medication, EXCEPT for the following: a. intranasal, inhaled, topical steroids, or local steroid injection (e.g., intra-articular injection); b. Systemic corticosteroids at physiologic doses <= 10 mg/day of prednisone or equivalent; c. Steroids as premedication for hypersensitivity reactions (e.g., CT scan premedication)."
- AUTOIMMUNE DISEASE: "Active autoimmune disease that might deteriorate when receiving an immuno-stimulatory agent. Patients with diabetes type I, vitiligo, psoriasis, or hypo- or hyperthyroid diseases not requiring immunosuppressive treatment are eligible."
- PREVIOUS MALIGNANT DISEASE: within the last 3 years except for a. superficial/non-invasive bladder cancer, or basal or squamous cell carcinoma in situ treated with curative intent; b. endoscopically resected GI cancers limited to the mucosal layer without recurrence in > 1 year
- INFECTIONS: "Active infection requiring systemic therapy. "
- VACCINATION: has received or will receive a live vaccine within 30 days prior to the first administration of study intervention. Seasonal flu vaccines that do not contain a live virus are permitted
- HYPERSENSITIVITY TO BINTRAFUSP ALFA: "Known severe hypersensitivity [Grade >= 3 NCI CTCAE 5.0] to investigational product or any component in its formulations, any history of anaphylaxis, or recent, within 5 months, history of uncontrollable asthma
- CARDIOVASCULAR DISEASE: "Clinically significant (i.e., active) cardiovascular disease: cerebral vascular accident/stroke (< 6 months prior to enrollment), myocardial infarction (< 6 months prior to enrollment), unstable angina, congestive heart failure (>= New York Heart Association Classification Class II), or serious cardiac arrhythmia requiring medication."
- BLEEDING: "history of bleeding diathesis or recent major bleeding events (i.e. Grade >= 2 bleeding events in the month prior treatment)
- Other severe acute or chronic medical conditions: "including drug-induced interstitial lung disease (ILD) or participant has had a history of drug-induced pneumonitis that has required oral or IV steroids", and/or other diseases, which in the opinion of the Investigator might impair the participant's tolerance for the study or ability to consistently participate in study procedures

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| <b>Alter</b>                                     | 18 Jahre und älter  |
| <b>Prüfzentren</b>                               | <b>Innere Medizin 1 (Geschlossen)</b><br>Gastroenterologie / Hepatologie<br>Theodor-Stern-Kai 7<br>60590 Frankfurt am Main<br>Laura Gesell<br>Tel: 069 6301-87769<br><a href="mailto:Laura.Gesell@unimedizin-ffm.de">Laura.Gesell@unimedizin-ffm.de</a><br><b>Universitätsklinikum Frankfurt (Geschlossen)</b><br>Medizinische Klinik I, Gastroenterologie/Hepatologie<br>Theodor-Stern-Kai 7<br>60590 Frankfurt am Main<br>Laura Gesell<br>Tel: 069 6301-87769<br><a href="mailto:Laura.Gesell@unimedizin-ffm.de">Laura.Gesell@unimedizin-ffm.de</a> |
| <b>Sponsor</b>                                   | AIO-Studien GmbH  |
| <b>Förderer</b>                                  | Merck KGaA  |
| <b>Registrierung in anderen Studienregistern</b> | ClinicalTrials.gov NCT04727541 (primäres Register)<br>EudraCT 2020-002605-25  |