KURZPROTOKOLL
Immatics IMA910

Öffentlicher Titel	IMA910 plus GM-CSF und low-dose Cyclophosphamid-Vorbehandlung bei fortgeschrittenem kolorektalem Karzinom
Wissenschaftl. Titel	An Open Label, Multicenter Phase 1-2 Study to Investigate the Effectiveness, Safety and Immunogenicity of a Monotherapy With Intradermal IMA910 Plus GM-CSF Following Pre -treatment With Low-dose Cyclophosphamide in Advanced Colorectal Carcinoma Patients Who Have Successfully Completed a 12 Week First-line Treatment With Oxaliplatin-based Chemotherapy
Kurztitel	Immatics IMA910
Studienart	multizentrisch, prospektiv, randomisiert, offen/unverblindet, einarmig, Pharma-Studie
Studienphase	Phase I/II
Erkrankung	Verdauung: Darmkrebs (Kolorektales Karzinom): Zweitlinie oder höher
Ziele	- Disease control rate - Safety assessment - Tumour response rates and SD rate - DCR - Duration of response - OS - Cellular and non-cellular immunomonitoring - Biomarkers - Analysis of tumour tissue - Overall Safety
Einschlusskriterien	- Aged at least 18 years - HLA type: HLA-A*02-positive - Histologically confirmed colorectal adenocarcinoma (CRC) - Radiological evidence (CT/MRI) of unresectable locally advanced and/or metastatic CRC prior to 12 week first-line oxaliplatin-based standard chemotherapy - 12 week first-line chemotherapy with an oxaliplatin-based regimen according to an established standard protocol (e.g. FOLFOX or XELOX) administered at the following minimum dosages over this 12 week period: Oxaliplatin 400 mg/m2, Fluorouracil (5FU) 10.000 mg/m2 or Capecitabine 84.000 mg/m2 (a time window for application of first-line chemotherapy of +4 weeks is allowed) - Response (CR, PR) or stabilization (SD) following a 12 week first-line oxaliplatin-based standard chemotherapy shown by radiological evidence (CT/MRI after last cycle of firstline oxaliplatin-based standard chemotherapy compared to CT/MRI taken before start of first-line oxaliplatin-based standard chemotherapy) - Patients accept a chemotherapy-free interval under close observation (CT or MRI scans performed every 9 weeks) - Maximum period between start of study treatment (Cyclophosphamide) and start of the last cycle of standard chemotherapy (= first day of last cycle of standard chemotherapy) is 42 days; minimum period is 18 days - Karnofsky Performance Status 80% - Able to understand the nature of the study and give written informed consent Willing and ability to comply with the study protocol for the duration of the study - Willing and ability to comply with the study protocol for the duration of the study
Ausschlusskriterien	- Any adjuvant systemic or local chemotherapy if ended 6 months before start of systemic first-line oxaliplatin-based standard chemotherapy - Progressive disease during or at the end of 12 week systemic first-line oxaliplatin-based standard chemotherapy

- CT/MRI scans taken more than 9 weeks before start of first-line oxaliplatin-based standard chemotherapy
- Response to 12 week first-line oxaliplatin-based standard chemotherapy resulting in resectable disease; curative treatment intended
- Immunosuppressive therapy within 10 days before first vaccination e.g. corticosteroid treatment (inhalative corticosteroids for e.g. asthma are allowed)
- Radiotherapy during and/or following the 12 week first-line oxaliplatin-based standard chemotherapy (palliative radiotherapy for bone metastasis is allowed)
- Concurrent or prior participation in a clinical trial applying interventional procedures (e.g. application of investigational drugs, surgical interventions) within the last 30 days before Screening 2 = Visit B
- History of other malignant tumours within the last 5 years, except basal cell carcinoma or curatively excised cervical carcinoma in situ
- Presence of known brain metastasis on MRI or CT scans
- Current partial or complete bowel obstruction
- Patients with a history or evidence of systemic autoimmune disease
- Any vaccination within 2 weeks before first vaccination
- Any planned prophylactic vaccination from study entry until the end of the induction period (Week 6 after first vaccination, exception: if medically indicated)
- Major surgery 4 weeks before first vaccination
- Any of the following abnormal laboratory values:
- o Haematology:
- - Hb <9 g/dL
- - WBC <2.5 x 10 hoch 9/L
- - Neutrophils <1.5 x 10 hoch 9/L
- - Lymphocytes <1.0 x 10 hoch 9/L
- - Platelets <75 x 10 hoch 9/L
- o Liver function:
- - Serum bilirubin >1.5 x upper normal limit (unless a history of Gilbert's disease)
- - ALAT or ASAT >3 x upper normal limit (>5 x ULN if liver metastases are present)
- - Alkaline Phosphatase >3 x upper normal limit (>5 x ULN if liver metastases are present)
- o Renal function: serum creatinine >200 mol/L (2.3 mg/dL)
- Known active hepatitis B or C infection
- Known HIV infection
- Active infections requiring oral or intravenous antibiotics
- Any other infection with a biological agent that can cause a severe disease and poses a severe danger to lab personnel working on patient tissues. Examples are: rabies, Mycobacterium tuberculosis, Coccidioides immitis
- Patients with other significant diseases currently uncontrolled by treatment which might interfere with study completion, including gastrointestinal, hepatic, renal, respiratory, cardiovascular, haematological, coagulation, metabolic or hormonal diseases with clinically relevant abnormal organ function for example:
- o Heart failure or non-compensated active heart disease (=NYHA Class III and IV)
- o Severe coronary heart disease, cardiac arrhythmia requiring medication, or uncontrolled hypertension

	- o Symptomatic neurotoxicity (motor or sensory) = Grade 3 according to Common Terminology Criteria for Adverse Events v3.0 (CTCAE) - o Severe pulmonary dysfunction - Psychiatric disabilities, seizures or central nervous system disorders that may interfere with the ability to give informed consent or perform adequate follow-up in the investigator's opinion - Pregnancy or breast-feeding - Hypersensitivity to the study drugs (cyclophosphamide, GM-CSF, IMA910) including excipients
Alter	18 Jahre und älter
Molekularer Marker	HLA-A*02
Sponsor	Immatics Biotechnologies GmbH (Hauptsponsor)
Förderer	Immatics Biotechnologies GmbH
Registrierung in anderen Studienregistern	ClinicalTrials.gov NCT00785122 (primäres Register) EudraCT 2007-005666-12
Therapie	Endoxana, Leukine, IMA910, Aldara
Links	Studien im Krankenhaus Nordwest