Background

- Pembrolizumab chemotherapy is standard treatment in 1st-line advanced HER2+ gastroesophageal adenocarcinoma (GEA).
- NGS of ctDNA and PD-L1 status was used to enrich patients for combination treatment.
- Results suggest that margetuximab + pembrolizumab activity may be increased in prospectively enriched patient populations.

Methods

- Pembrolizumab (200 mg) IV Q3 wk
- Escalating margetuximab (10 mg/kg & 15 mg/kg)
- Response assessed by RECIST & irRECIST
- Data cut-off October 4, 2018

Results

- ORR: 29.03% (9/31) (95% CI: 14.22%, 48.04%)
- DCR: 67.9% (19/28) (95% CI: 47.65%, 84.12%)
- Median PFS: 3.5 months (95% CI: 1.41, 5.45)
- Median OS: Not reached

Conclusions

- Margetuximab + pembrolizumab is a chemotherapy-free combination designed to coordinately engage the adaptive immune system and increase response rates in patients with HER2+ gastroesophageal adenocarcinoma.
- Consistent with prior tissue-based reports, many GEA patients who progress on or after trastuzumab-based therapy may harbor circulating tumor DNA (ctDNA) that has become resistant to prior anti-HER2 therapy.
- Results suggest that margetuximab + pembrolizumab may be increased in prospectively enriched patient populations to achieve higher overall response rates and extend progression-free survival in patients with HER2+ gastroesophageal adenocarcinoma.