Margetuximab plus Pembrolizumab for Treatment of Patients with HER2-Positive Gastroesophageal Adenocarcinoma (GEA) Post-Trastuzumab: Survival Analysis


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Background

• Trastuzumab – mechanism of action is to block HER2 signaling and thus tumor growth and survival
• Pembrolizumab – a checkpoint inhibitor agent that targets programmed cell death 1 (PD-1) and its ligand, PD-L1

• Margetuximab – a mAb that binds to HER2, activating signaling pathways that drive tumor growth and survival

Methods

• M0: primary tumors, M1: metastasis, M1a: distant metastasis, M1b: visceral metastasis
• PD-L1: programmed death ligand 1
• TCGA: The Cancer Genome Atlas
• TTTA: The Therapeutic Targeting of Cancer in America

Margetuximab + Pembrolizumab

Progression-Free Survival for Overall Population

Survival Analysis by HER2 and PD-L1 Expression

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Survival Analysis by HER2 and PD-L1 Expression

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Overall Survival by Tumor Site

Overall Survival by Tumor Site

Overall Survival by Tumor Site

Overall Survival by Tumor Site

Overall Survival by Tumor Site

Efficacy Endpoints in Selected Biomarker Positive Populations by Anatomical Site

Conclusions

• Margetuximab in combination with pembrolizumab mediates enhanced antitumor activity in HER2+ GEA patients with co-existent PD-L1 expression, with further gains in objective response rates observed among patients with baseline HER2 IHC3+/PD-L1+ gastric cancers.
• Margetuximab + pembrolizumab showed promising activity across the spectrum of HER2+ GEA, however the study did not meet its primary endpoint of OS in patients with HER2+ GEA who progressed after front-line trastuzumab and chemotherapy.
• Margetuximab may be a preferred option for patients with HER2+ GEA who progressed after trastuzumab and chemotherapy, especially those with PD-L1 expression.