EHA 2024 Langzeit-Follow-up MagnetisMM3

Elranatamab

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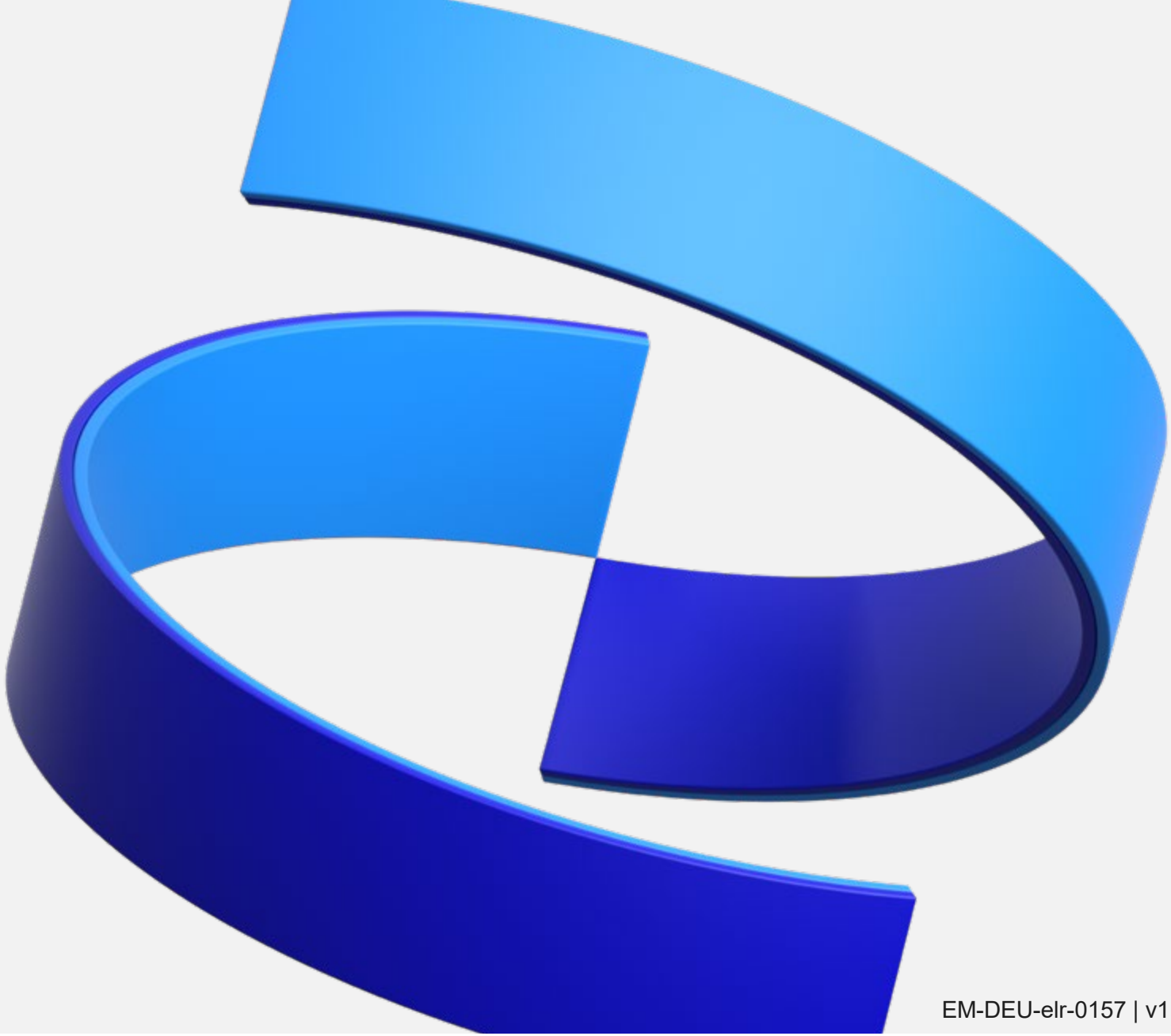

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Long-Term Survival After Elranatamab Monotherapy in Patients With Relapsed or Refractory Multiple Myeloma: MagnetisMM-3

Mohty M et al. Poster Presentation at EHA 2024 (Abstract P932)

Pfizer-Sponsored Study

Long-Term Survival After Elranatamab Monotherapy in Patients With Relapsed or Refractory Multiple Myeloma: MagnetisMM-3 (1/7)

Background

- In the open-label, non-randomized, phase 2 MagnetisMM-3 registrational study (NCT04649359), elranatamab monotherapy induced deep and durable responses in BCMA-naïve patients with RRMM (N=123)[1,2]
  - OS data were immature at the last data cut (Sep 11, 2023), with >50% of patients censored, after a median follow-up (reverse KM method) of 22.0 (95% CI, 21.6-22.6) months[2]
- This presentation reports results obtained >2 years after the last patient was initially dosed on January 7, 2022

Objective

- To report updated efficacy and safety results from MagnetisMM-3, collected >2 years after the last patient was initially dosed

1. Lesokhin AM, et al. *Nat Med*. 2023;29:2259-2267.
2. Tomason M, et al. *Blood*. 2023;142(suppl 1):3385.

BCMA = B-cell maturation antigen; CI = confidence interval; KM = Kaplan-Meier; OS = overall survival; RRMM = relapsed/refractory multiple myeloma.

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Long-Term Survival After Elranatamab Monotherapy in Patients With Relapsed or Refractory Multiple Myeloma: MagnetisMM-3 (2/7)

Methods

- Eligible patients had disease refractory to ≥1 PI, ≥1 IMiD, and ≥1 anti-CD38 antibody
- Patients received sc elranatamab as 2 step-up priming doses followed by 76 mg QW
- Patients who received ≥6 months of QW dosing and achieved ≥PR for ≥2 months were transitioned to a Q2W dosing schedule and, subsequently, to a Q4W dosing schedule after ≥6 Q2W cycles
- **Primary endpoint:** ORR, assessed by BICR, per IMWG criteria[1]
- **Secondary endpoints:** DOR and PFS by BICR, OS, safety
- SPMs were determined by clinical review using the system organ class Neoplasms benign, malignant, and unspecified (including cysts and polyps)
- The data cutoff date was March 26, 2024; median follow-up by reverse KM method was 28.4 (95% CI, 28.0-29.0) months

BICR = blinded-independent central review; CD = cluster of differentiation; CI = confidence interval; DOR = duration of response; IMiD = immunomodulatory drug; IMWG = International Myeloma Working Group; KM = Kaplan-Meier; ORR = objective response rate; OS = overall survival; PFS = progression-free survival; PR = partial response; QW = once weekly; Q2W = once every 2 weeks; Q4W = once every 4 weeks; sc = subcutaneous; SPM = secondary primary malignancy.

1. ClinicalTrials.gov. https://clinicaltrials.gov/study/NCT04649359. Accessed April 26, 2024

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Pfizer Medical Affairs

Long-Term Survival After Elranatamab Monotherapy in Patients With Relapsed or Refractory Multiple Myeloma: MagnetisMM-3 (3/7)

Patients and Treatment

Table: Demographics and Baseline Characteristics

	N=123
Age, median (range), years	68.0 (36.0-89.0)
Male, n (%)	68 (55.3)
Race, n (%)	
African American or Black	9 (7.3)
Asian	16 (13.0)
White	72 (58.5)
Unknown	1 (0.8)
Not reported[a]	25 (20.3)
ECOG PS, n (%)	
0	45 (36.6)
1	71 (57.7)
2	7 (5.7)
R-ISS disease stage, n (%)	
I	28 (22.8)
II	68 (55.3)
III	19 (15.4)
Unknown/missing	8 (6.5)
Cytogenetic risk, n (%)	
Standard	83 (67.5)
High[b]	31 (25.2)
Missing	9 (7.3)

Table: Demographics and Baseline Characteristics Cont'd

	N=123
Extramedullary disease by BICR, n (%)[c]	
Yes	39 (31.7)
No	84 (68.3)
Bone marrow plasma cells, n (%)	
<50%	89 (72.4)
≥50%	26 (21.1)
Missing	8 (6.5)
Patients with ≥1 poor prognosis feature, n (%)[d]	94 (76.4)
Prior lines of therapy, median (range)	5.0 (2.0-22.0)
Prior stem cell transplant, n (%)	87 (70.7)
Exposure status, n (%)	
Triple-class[e]	123 (100)
Penta-drug[f]	87 (70.7)
Refractory status, n (%)	
Triple-class[e]	119 (96.7)
Penta-drug[f]	52 (42.3)
Refractory to last line of therapy, n (%)	118 (95.9)

- Overall, 123 BCMA-naïve patients were treated with elranatamab. Patient demographics and disease characteristics are presented in the **Table**

Please see slide notes for footnotes and abbreviations.

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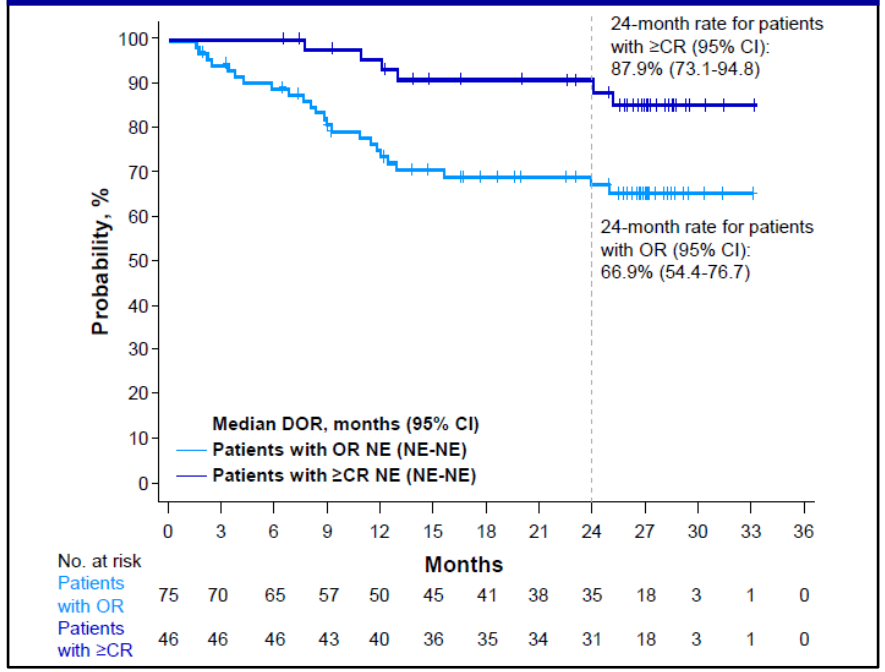
Long-Term Survival After Elranatamab Monotherapy in Patients With Relapsed or Refractory Multiple Myeloma: MagnetisMM-3 (4/7)

Efficacy: ORR, MRD-negativity, and DOR

- With extended follow-up, ORR per BICR remained at 61.0% (≥CR rate, 37.4%)
  - sCR, 16.3%; CR, 21.1%; VGPR, 18.7%; PR, 4.9%
- MRD negativity rate was 90.3% in patients with ≥CR who were evaluable for MRD (n=31) at the threshold of 10^{-5}
- Median DOR was not reached (**Figure**)
- The probability of maintaining a response at 2 years was:
  - 66.9% (95% CI, 54.4-76.7) among all responders, and
  - 87.9% (95% CI, 73.1-94.8) in patients with ≥CR

Figure: DOR



BICR = blinded-independent central review; CI = confidence interval; CR = complete response; DOR = duration of response; MRD = minimal residual disease; NE = not evaluable; OR = objective response; ORR = objective response rate.

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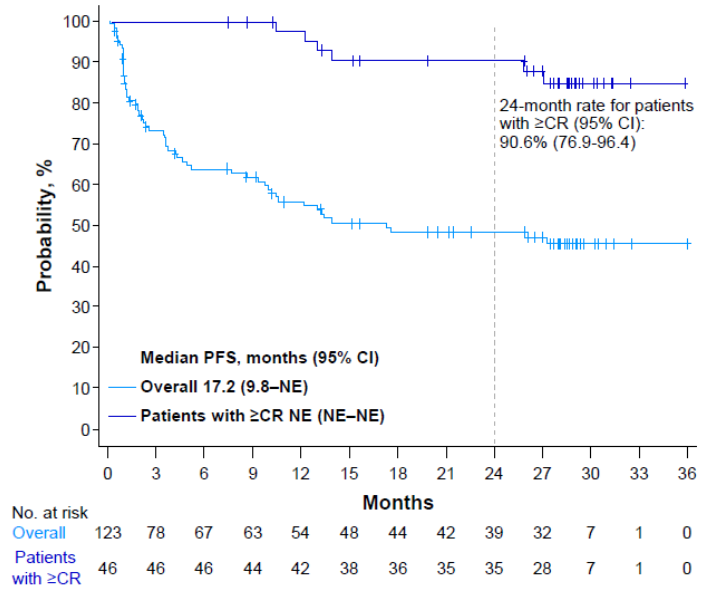
Long-Term Survival After Elranatamab Monotherapy in Patients With Relapsed or Refractory Multiple Myeloma: MagnetisMM-3 (5/7)

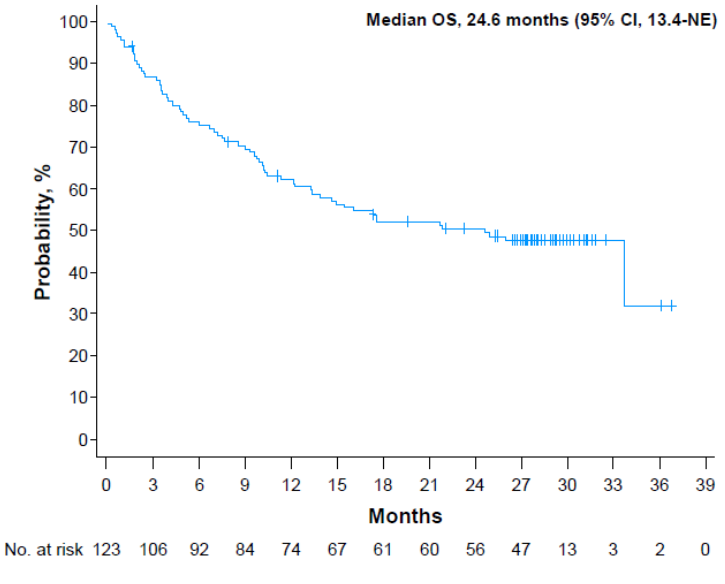
Efficacy: PFS and OS

Figure 1: PFS



- Median PFS was 17.2 (95% CI, 9.8-NE) months (**Figure 1)**
  - In patients with ≥CR, median PFS was not reached and the probability of being progression-free at 2 years was 90.6% (95% CI, 76.9-96.4)
- Median OS was 24.6 (95% CI, 13.4-NE) months (**Figure 2**)

Figure 2: OS



CI = confidence interval; CR = complete response; NE = not evaluable; OS = overall survival; PFS = progression-free survival.

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Long-Term Survival After Elranatamab Monotherapy in Patients With Relapsed or Refractory Multiple Myeloma: MagnetisMM-3 (6/7)

Safety

- No new safety signals were observed with extended follow-up
- With 6 more months of follow-up, there were 4 new deaths
  - 2 patients with disease under study and 1 patient each with unknown reason and septic shock
- 5 (4.1%) patients had SPMs, all of which were squamous cell carcinomas of the skin
  - No hematologic SPMs were observed
  - All 5 patients with SPMs had received prior lenalidomide and SCT

SCT = stem cell transplant; SPM, secondary primary malignancy

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Long-Term Survival After Elranatamab Monotherapy in Patients With Relapsed or Refractory Multiple Myeloma: MagnetisMM-3 (7/7)

Authors' Conclusions

- Elranatamab continued to demonstrate deep and durable responses in heavily pretreated (median 5 prior LOTs; 96.7%, TCR), BCMA-naïve patients with RRMM
  - MRD-negativity rate was 90.3% in evaluable patients with ≥CR
  - Median DOR was still not reached (2-year rate, 66.9% [95% CI, 54.4-76.7])
  - Median PFS was 17.2 (95% CI, 9.8-NE) months
  - Median OS was 24.6 (95% CI, 13.4-NE) months
- No new safety signals were observed. Although longer follow-up is needed, few SPMs were seen (<5%; all squamous cell carcinomas)
  - No hematologic SPMs were reported

BCMA = B-cell maturation antigen; CI = confidence interval; CR = complete response; DOR = duration of response; LOT = line of therapy; MRD = minimal residual disease; NE = nor evaluable; OS = overall survival; PFS = progression-free survival; RRMM = relapsed/refractory multiple myeloma; SPM = secondary primary malignancy; TCR = triple-class refractory.

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