NY-ESO expression testing using Ventana*s IHC test in Daiichi Sankyo*s First-in-human study of DS-2243a in participants with Advanced Solid Tumors

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Ethical review	Approved WMO
Status	Pending
Health condition type	Miscellaneous and site unspecified neoplasms malignant and unspecified
Study type	Interventional

Summary

ID

NL-OMON57544

Source
ToetsingOnline

Brief title
Ventana*s IHC test use in DS2243-054

Condition

- Miscellaneous and site unspecified neoplasms malignant and unspecified

Synonym
NY-ESO, solid tumors

Research involving
Human

Sponsors and support

Primary sponsor: Daiichi Sankyo, Inc.
Source(s) of monetary or material Support: Daiichi Sankyo;Inc.

Intervention

Keyword: /round cell liposarcoma, adenocarcinoma NSCLC, myxoid, NY-ESO, squamous cell carcinoma non small cell lung cancer, synovial sarcoma, urothelial carcinoma

Outcome measures

Primary outcome

The corresponding endpoint for this performance study CPS-01-DS2243-054 is

NY-ESO expression levels detected in pre-treatment tumor tissue samples

collected from participants of drug trial DS2243-054.

Secondary outcome

Additional endpoints may include:

1) Percentage of evaluable and non-evaluable cases

2) Percentage of samples requiring repeat staining due to rejection of the

negative control (The negative marker control will be evaluated for acceptable

signal/noise ratio and background staining)

Study description

Background summary

This clinical performance study plan (CPSP) for Clinical Performance Study CPS-01-DS2243-054 relates to the use of the NY-ESO (SP511) Clinical Trial Assay (CTA) to identify and select New York esophageal squamous cell carcinoma -1 (NY-ESO-1) and L antigen family member 1 (LAGE-1) proteins (hereafter referred to as NY-ESO) positive synovial sarcoma (SS), myxoid/round cell liposarcoma (MRCLS), squamous cell type Non-small cell lung cancer (Sq-NSCLC), Adenocarcinoma type Non-small cell lung cancer (Ad-NSCLC), or urothelial carcinoma (UC) patients by light microscopy for recruitment into Daiichi

Sankyo*s drug study DS2243-054. This CPSP is compliant with ICH-GCP, Declaration of Helsinki, GDPR and ISO20916 and contains references to the requirements of a CPSP per Annex XIII, section 2.3.2 of EU Regulation 2017/746 on in vitro Diagnostic Medical Devices (IVDR) and the corresponding section of supporting documents where the information is located.

Study objective

As a primary objective, the performance of NY-ESO (SP511) CTA will be assessed by determining how often the device is able to yield a valid NY-ESO positive result. The corresponding endpoint for this study is the percentage of cases that yield >= 1% viable tumor cells with positive cytonuclear staining, at any intensity of staining.

Exploratory objective (related to NY-ESO expression of drug trial DS2243-054): NY-ESO expression as determined by the NY-ESO (SP511) CTA and its correlation with response and/ or safety of participants treated with DS-2243a will be investigated.

Study design

This clinical performance study CPS-01-DS2243-054 will be conducted as a combined investigation with Daiichi Sankyo*s corresponding drug study DS2243-054 *PHASE 1, OPEN-LABEL, MULTICENTER, FIRST-IN-HUMAN TRIAL OF DS-2243a IN PARTICIPANTS WITH ADVANCED SOLID TUMORS.*

Drug Trial DS2243-054
The First-in-Human trial, DS2243-054, is designed to evaluate the safety and tolerability of DS-2243a and to provide a preliminary assessment of its efficacy in the specified participant populations, that include participants with advanced or metastatic SS, MRCLS, Sq-NSCLC, Ad-NSCLC, and UC. This trial consists of two parts: Dose Escalation (Part 1) and Dose Expansion (Part 2).

Dose Escalation Part (Part 1)
Dose escalation of DS-2243a to determine the maximum tolerated dose (MTD) and/or the Recommended Dose for Expansion (RDE) of DS-2243a when administered as a single agent in participants with SS, MRCLS, NSCLC (Sq/Ad), or UC. SS and MRCLS will be enrolled in dose escalation and backfill selected by HLA-A2 positivity, while NSCLC and UC can be enrolled only in backfill selected by both HLA-A2 positivity and NY-ESO positivity.

Dose Expansion Part (Part 2)
Following the identification of the MTD (and/or RDE) and step-up dose regimen, tumor specific dose-expansion cohorts (Part 2) will be initiated in the following indications: SS (and/or MRCLS), sq-NSCLC, UC, and Ad-NSCLC.

Additional participants may be enrolled based on the safety, efficacy, biomarker, and PK data observed in Part 1 and Part 2.

Clinical performance Study CPS-01-DS2243-054
The Clinical Performance Study comprises the determination of NY-ESO expression status using the NY-ESO (SP511) CTA for the purpose of eligibility assessments for study DS-2243-054.
It does not include NY-ESO expression testing for exploratory purposes of study DS2243-054.

Intervention

Determination of the NY-ESO expression status in tumor tissue using the investigational NY-ESO (SP511) CTA will be done as part of the screening assessments. For specific cohorts, only patients with a positive test result will be selected for drug trial DS2243-054.

Study burden and risks

False-Negative Results
A false-negative IHC test result i.e. an NY-ESO positive tumor with a test result showing negative status at the protein/staining level, may result in exclusion from the clinical trial where the study participant may opt for other experimental therapies or clinical trials.
False-Positive Results
False positive results may result in patient inappropriately enrolled in the clinical trial. Analytical validation and assay controls (positive and negative system level controls) applied during centralized testing will minimize the risk of false positive and false negative results. Residual risks to study subjects will be mitigated by measures related to the experimental treatment, including monitoring for cytokine release syndrome (CRS) and CRS-induced cytopenia. Furthermore, DS-2243a will be administered subcutaneously, and a suitable step-up dose regimen will be implemented to reduce CRS risk. The risk is also considered to be acceptable since these patients should have received prior standard of care (SoC) therapies and this clinical trial is considered by the investigator to have a better risk/benefit assessment than the alternative therapies available.

Clinical Benefit Assessment
The clinical utility and/or benefit of the NY-ESO (SP511) CTA has not been established. This CTA will be used to identify and select NY-ESO positive advanced solid tumor patients for recruitment onto drug study DS2243-054.

Overall Benefit-Risk Assessment
It is not expected that the results from the investigational CTA would expose study subjects to excess risk. Planned study will enroll patients who are

deemed appropriate for an investigational treatment in the opinion of the investigator and fulfill the eligibility criteria detailed in the clinical study protocol. It is expected that these patients will have no standard treatment options which are known to be effective.
Based on the safety data generated in the nonclinical studies, and considering the planned risk mitigation strategies, the anticipated benefit risk profile of the DS-2243a is considered to be favourable and justifies the clinical development advancement

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

The study population of CPS-01-DS2243-054 includes samples of all subjects tested for NY-ESO expression status as part of the screening procedures of drug

trial DS2243-054.
Inclusion criteria for the drug trial are defined in section 5 of the drug trial protocol. Sample inclusion criteria are as follows:
A pre-treatment tumor tissue sample collected within 6 months of Main consent and after completion of the most recent anticancer treatment regimen is preferred if available. If this is not available, archival tumor tissue samples collected more than 6 months prior to Main consent may be acceptable. A newly obtained tumor tissue sample is required if there is no pre-treatment or archival tumor tissue sample available.
Formalin-fixed, paraffin-embedded tumor tissue specimens are required for this trial.
Examples of acceptable specimens include resection or excisional biopsies, core needle biopsies and transbronchial forceps biopsies.
Details related to sample requirements are provided in the Laboratory Manual:
Briefly, tumor tissue will be collected using institutional standard practices and assigned a unique identifier. In the case of wet tissue collection, standard labeling and fixation processes will be performed as specified in the lab manual. Site staff will fill out the information in paper-based sample requisition form, and additional information will be entered on the RTD-Client Request Portal. For any additional information regarding shipping, handling, and holiday schedules, please refer to the lab manual.

Exclusion criteria

The study population of CPS-01-DS2243-054 includes samples of all subjects tested for NY-ESO expression status as part of the screening procedures of drug trial DS2243-054.
Exclusion criteria for the drug trial are defined in section 5 of the drug trial protocol. Sample exclusion criteria are as follows:
Cryobiopsies, decalcified bone biopsies, and any cytological specimens including fine needle aspirates are not acceptable for this trial. Samples not fulfilling requirements defined in the lab manual.

Study design

Design

Study type: Interventional

Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Diagnostic

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-01-2026
Enrollment:	30
Type:	Anticipated

Medical products/devices used

Generic name:	NY-ESO (SP511) CTA
Registration:	No

Ethics review

Approved WMO

Date:	15-05-2025
Application type:	First submission
Review commission:	METC NedMec

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL87834.000.25