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**Welcome**

# Tumor Outcomes for ROMAN: Phase 3 Trial of Avasopasem Manganese (GC4419) for Severe Oral Mucositis (SOM) in Patients Receiving Chemoradiotherapy (CRT) for Locally Advanced Head and Neck Cancer (LAHNC)

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# Disclosures

- Employment – University of Iowa Hospitals & Clinics
- Uncompensated Research Advisor for Galera Therapeutics, Inc.
- Will discuss Investigational Use of a drug



# Learning Objectives

To gain an understanding of the phase 3 ROMAN trial including:

- Study design and patient population
- Avasopasem reduction of chemoradiotherapy-related Severe Oral Mucositis in patients with Locally Advanced Head and Neck Cancer
- Long-term outcomes
  - Tumor control
  - Avasopasem reduction of cisplatin-related Chronic Kidney Disease
- Safety and most frequent adverse events



# Background

- IMRT + cisplatin SoC for LAHNC
- ~70% of patients develop SOM (WHO grade 3 or 4)
  - Grade 4 OM: ~20–25%
  - Median duration: 3–4 weeks
  - Median onset: ~40 Gy
- WHO score: combines anatomic, symptomatic, functional aspects into one OM severity score
- No FDA-approved HNC SOM drugs

		WHO OM score
SOM	Ulcers Unable to tolerate solid or liquid diet Requires IV or tube feeding	4
	Ulcers Requires liquid diet	3
	Ulcers Able to eat solid diet	2
	No ulcers Erythema and soreness	1

1. Henke M et al. *J Clin Oncol* 2011;29:2815–20; 2. Le QT et al. *J Clin Oncol* 2011;29:2808–14; 3. Kudrimoti MA et al. *J Biotechnol* 2016;239:115–25.

FDA, United States Food and Drug Administration; IMRT, intensity-modulated radiation therapy; LAHNC, locally advanced head and neck cancer; OM, oral mucositis; SoC, standard of care; SOM, severe OM; WHO, World Health Organization.



# Avasopasem Manganese (AVA, GC4419)

- Investigational new drug product
- Selective small molecule dismutase mimetic
- Converts RT-induced superoxide to hydrogen peroxide
- Protects normal cells, but not cancer cells, from RT
  - Superoxide initiates tissue damage & inflammatory cascade → OM

1. El-Mahdy MA et al. *Free Radic Biol Med* 2020;160:630–42; 2. Riley DP and Schall OF. *Adv Inorg Chem* 2006;59:233–63.  
OM, oral mucositis; RT, radiation therapy.



# Promising Phase 2b SOM Data

Anderson, *JCO* 2019

## Avasopasem manganese 90 mg appeared to reduce SOM

- SOM duration reduced ( $P=0.024$ )
- SOM incidence through IMRT reduced ( $P=0.009^*$ )
  - Grade 4 OM incidence reduced ( $P=0.045^*$ )
- Adverse event profile comparable, avasopasem vs placebo arm
- Tumor outcomes maintained at 1 & 2 years, avasopasem vs placebo
  - Anderson, *IJROBP* 2022
- Avasopasem manganese 30 mg appeared to be intermediate in effect between 90 mg and placebo

\* Nominal  $P$  value not formally tested.

IMRT, intensity-modulated radiation therapy; OM, oral mucositis; SOM, severe OM.



# ROMAN: Phase 3 90 mg Avasopasem Manganese vs Placebo

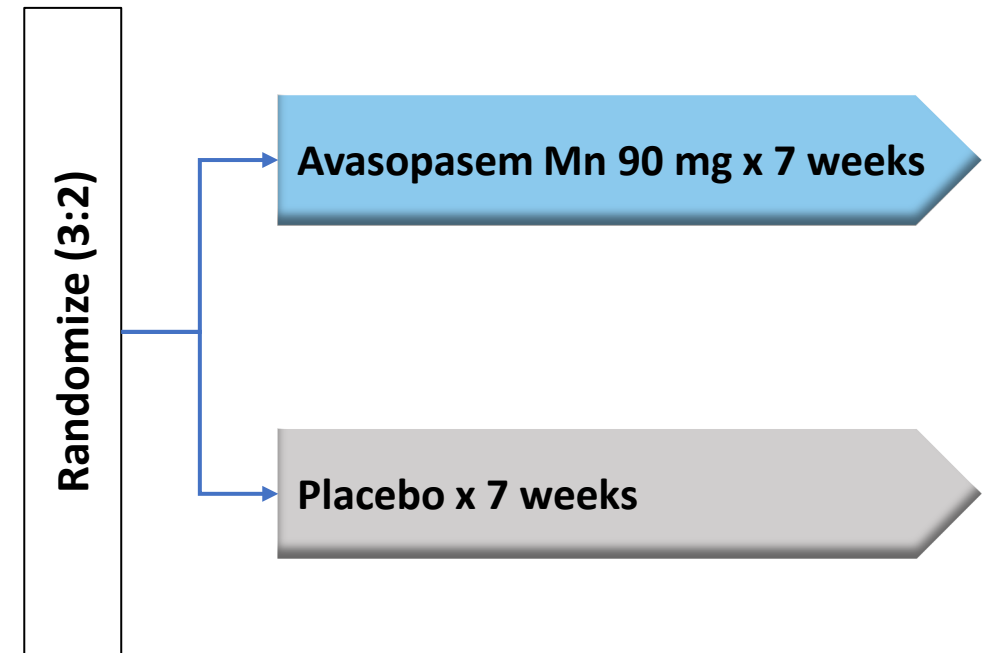
*Reduction in Oral Mucositis with Avasopasem Manganese*





# GT-301: The ROMAN Trial

<b>Population</b>	<ul style="list-style-type: none"><li>• Oral cavity/oropharynx tumor</li><li>• Locally advanced, squamous cell</li><li>• Eligible for SoC: 7 weeks IMRT + cisplatin</li></ul>
<b>Treatment</b>	<ul style="list-style-type: none"><li>• Avasopasem Mn 90 mg or placebo</li><li>• 60-minute IV infusion, Mon-Fri</li><li>• Ending ≤60 mins pre-RT</li></ul>
<b>Stratification factors</b>	<ul style="list-style-type: none"><li>• Surgery status: post-op or definitive</li><li>• Cisplatin schedule: q3wks or weekly</li></ul>



**WHO scoring by trained investigator–evaluators, QC’d process BIW during RT then QW x 2**

BIW, twice a week; IMRT, intensity-modulated RT; IV, intravenous; QW, once weekly; q3wks, once every three weeks; RT, radiation therapy; SoC, standard of care; WHO, World Health Organization.



# ROMAN Endpoints

## Primary endpoint

- Incidence of SOM through IMRT
  - Cochrane-Mantel-Haenszel relative risk calculated

## Secondary efficacy endpoints

- Total number of days of SOM (“duration” in phase 2b)
  - In all patients
  - 0 days for patients w/o SOM
- Incidence & total number of days of grade 4 SOM

Holm-Bonferroni correction for multiple comparisons

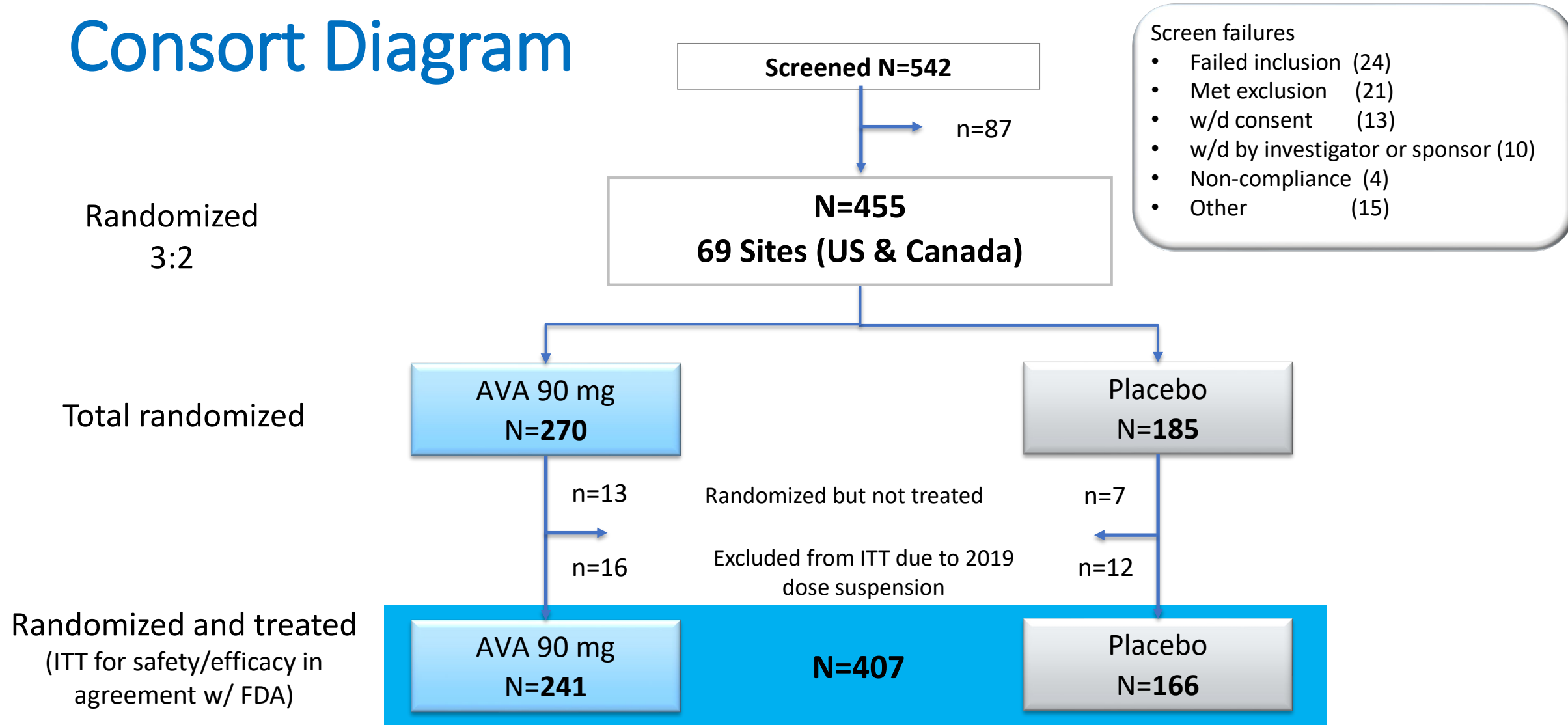
## Additional endpoints

- Safety and tolerability
- Tumor outcomes: LRC, DM, PFS - 1 year; OS – 1 & 2 years
- Renal function: 1 year

DM, distant metastasis; IMRT, intensity-modulated radiation therapy; LRC, locoregional control; OS, overall survival; PFS, progression-free survival; SOM, severe oral mucositis.



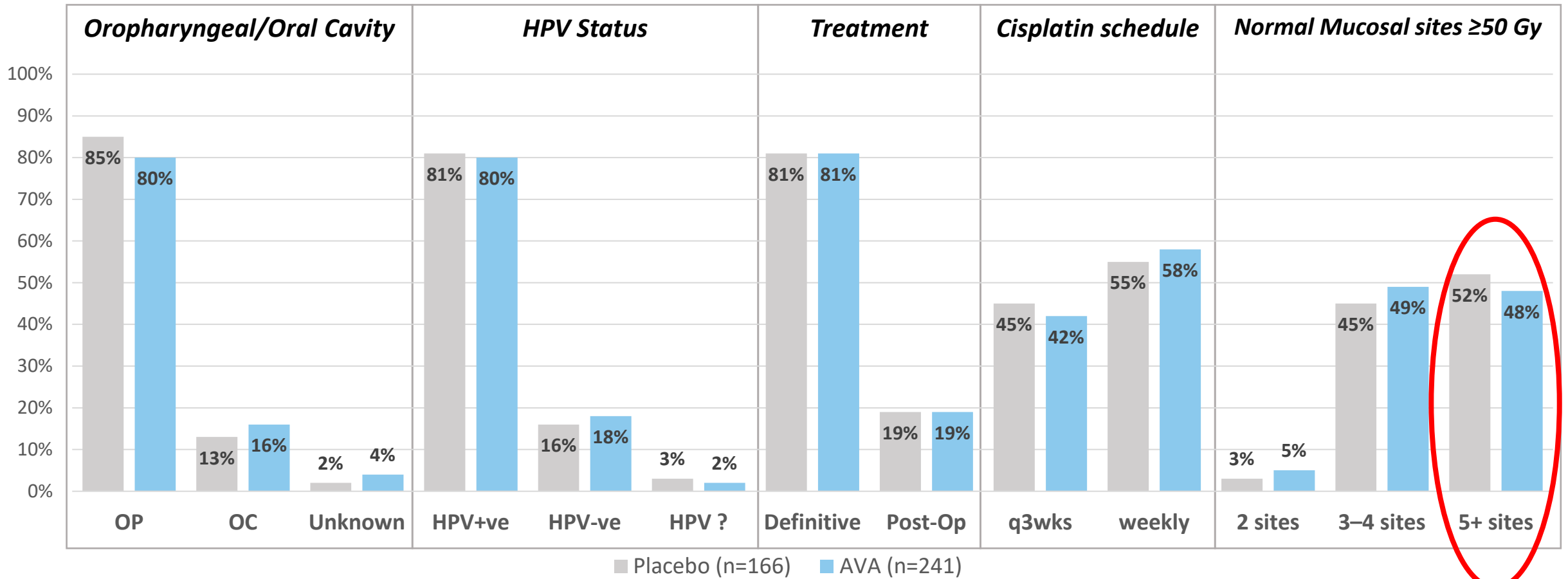
# Consort Diagram



AVA, avasopasem Mn; FDA, United States Food and Drug Administration; ITT, intent-to-treat population.



# Patient Characteristics



HPV, human papillomavirus; qw, once weekly; q3wks, once every three weeks.



# ROMAN: Phase 3 Results



# Treatment Adherence

## ITT Population

	Avasopasem (N=241)	Placebo (N=166)
IMRT mean/median total dose (range)	64.4/70 (8-70)	68.2/70 (13-71)
% with RT breaks > 5 consecutive fractions	8	10
Cisplatin median relative dose intensity, %		
• Q3wks	90	88
• Qw	99	97
Planned avasopasem/placebo doses received		
• Median/Mean, %	100/87	100/96
• Permanently stopped dosing for adverse event, %	10	7
• Dose reductions <sup>a</sup> , %		
- One	10	5
- Two	6	1

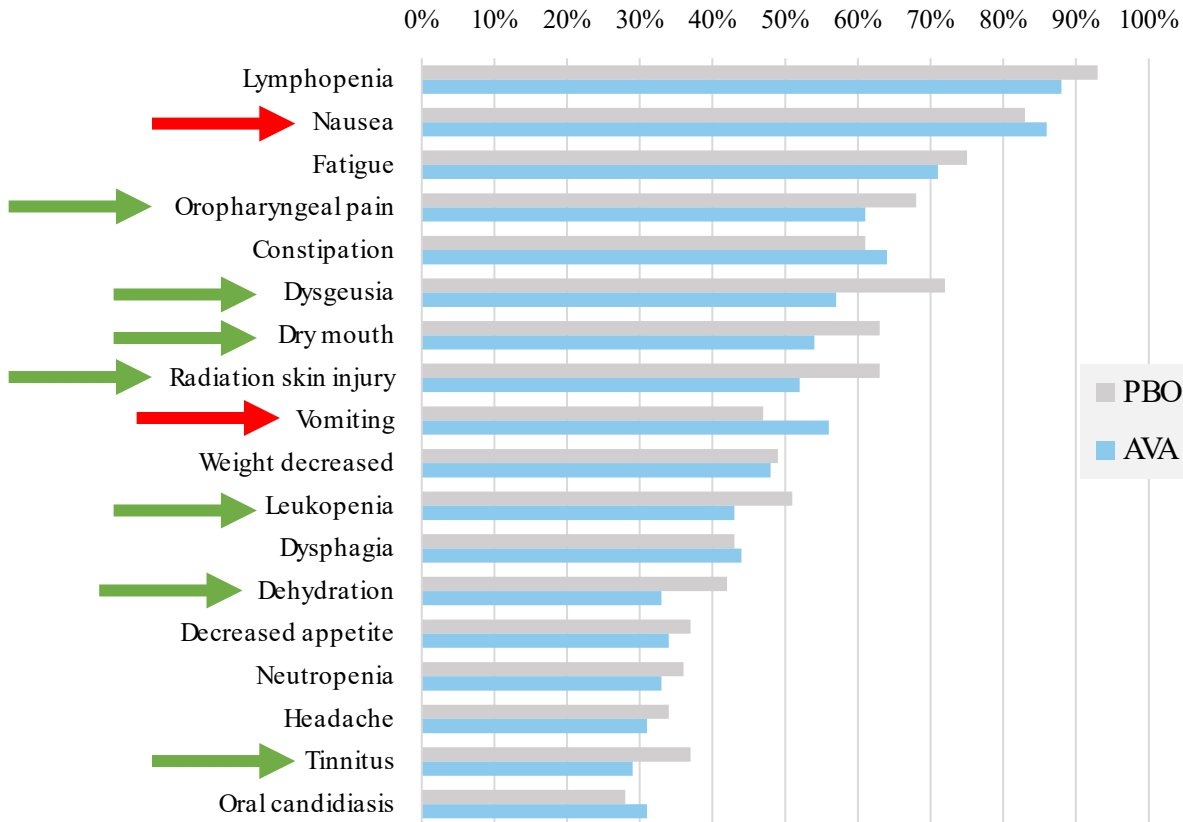
<sup>a</sup>Dose reductions were 25% of the starting dose.

Gy, gray; IMRT, intensity-modulated radiation therapy; ; ITT, intent-to-treat; qw, once weekly; q3wks, once every three weeks RT, radiation therapy.

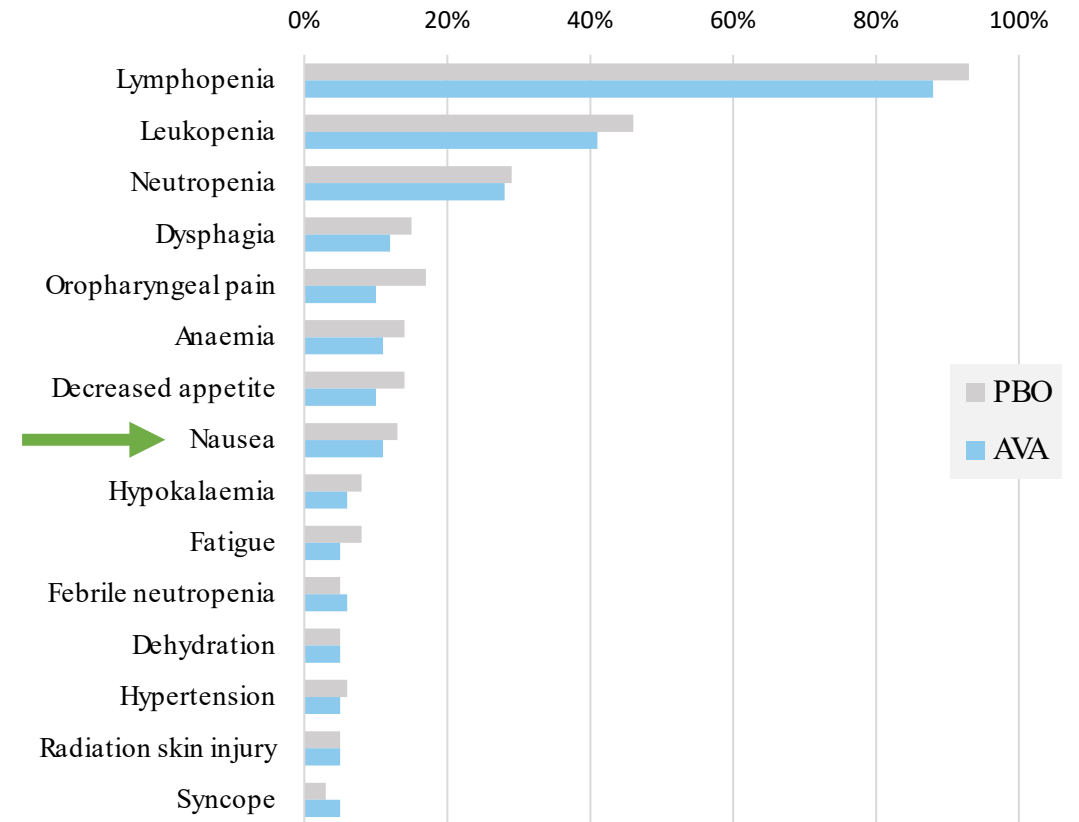


# Most Frequent Adverse Events

Adverse events<sup>a</sup> (all grades, all causes)



Adverse events<sup>a</sup> grades  $\geq 3$



<sup>a</sup>ITT population.

AVA, avasopasem Mn; ; ITT, intent-to-treat; PBO, placebo.

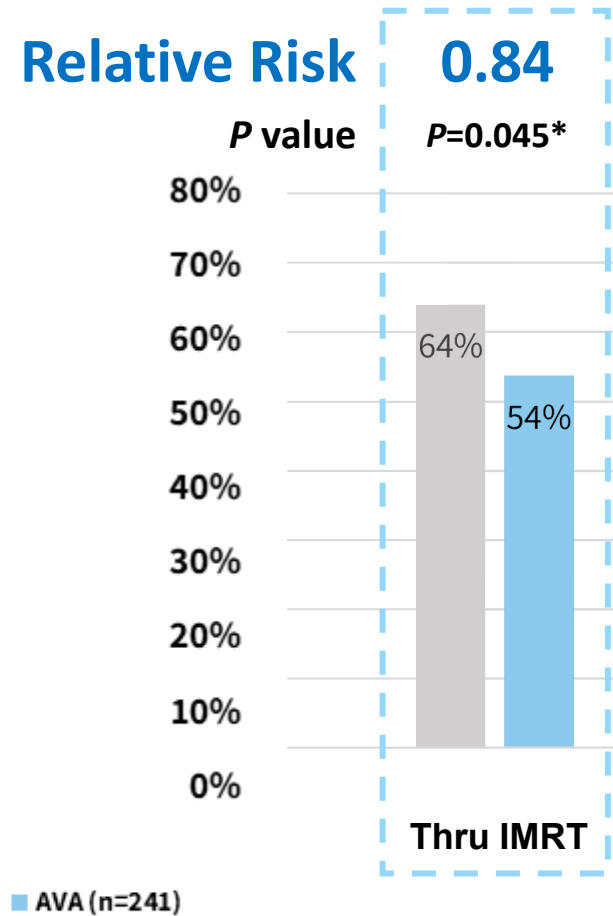
PBO = Placebo n=166

AVA = Avasopasem n=241



# SOM Incidence Reduced

## Primary Endpoint ITT Population



\* Statistically significant per SAP.

AVA, avasopasem; IMRT, intensity-modulated radiation therapy; ITT, intent-to-treat; PBO, placebo; SAP, statistical analysis plan; SOM, severe oral mucositis.

ITT population

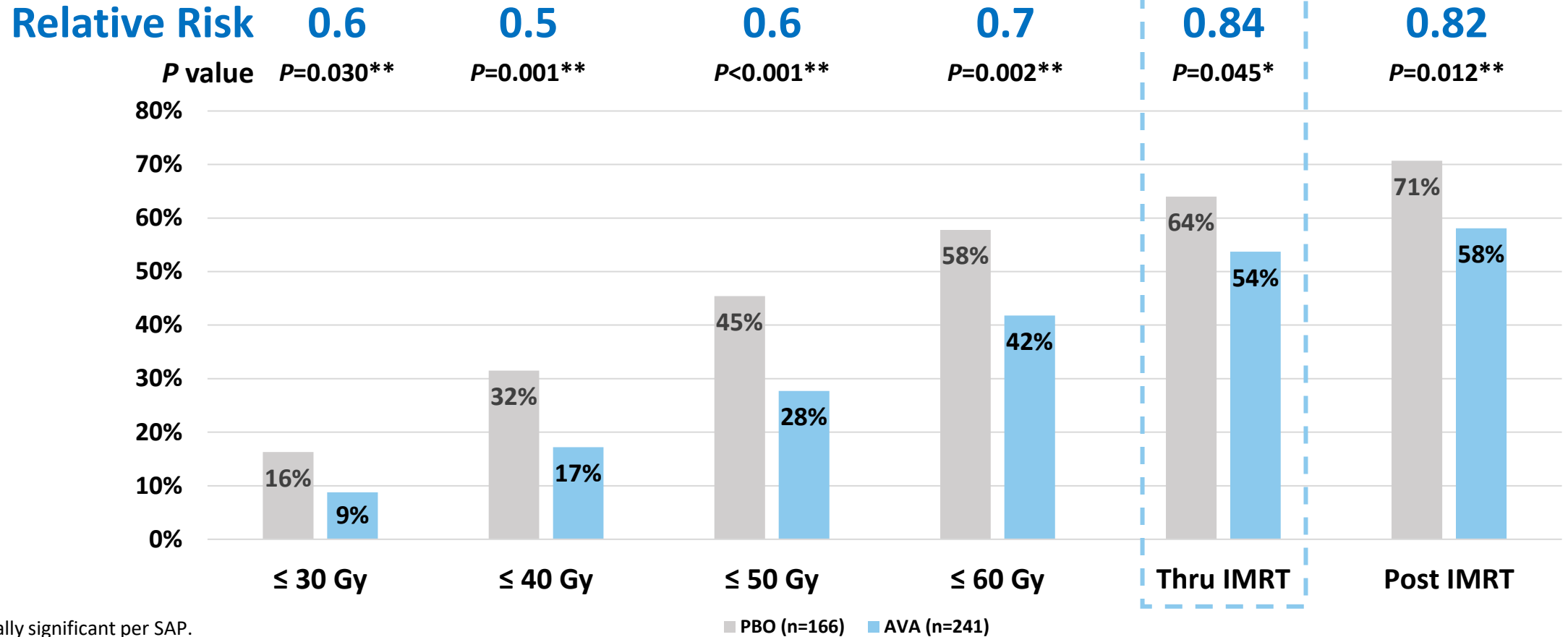




# SOM Incidence Reduced at All IMRT Landmarks

ITT Population

*Primary endpoint*



\* Statistically significant per SAP.

\*\* Exploratory endpoints, not formally tested as part of SAP.

AVA, avasopasem Mn; Gy, gray; IMRT, intensity-modulated radiation therapy; ITT, intent-to-treat; PBO, placebo; SAP, statistical analysis plan; SOM, severe oral mucositis.

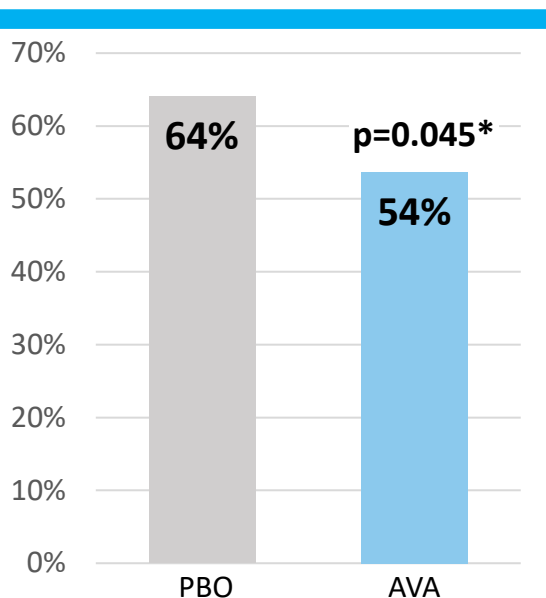
ITT population



# ROMAN Results across key endpoints (n=407)

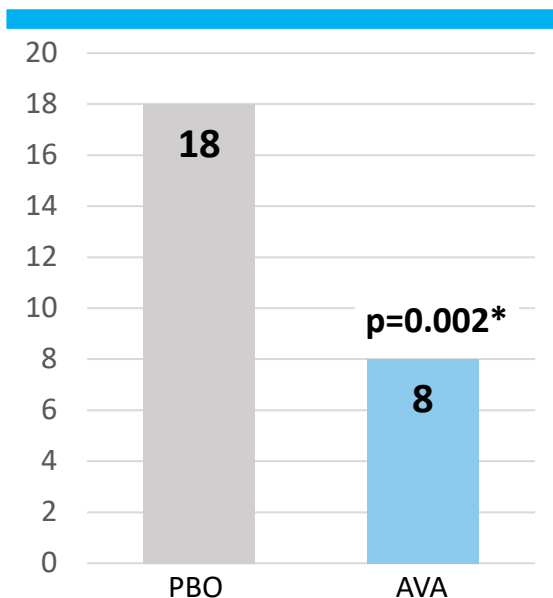
## SOM incidence

**16%** Reduction in SOM Incidence



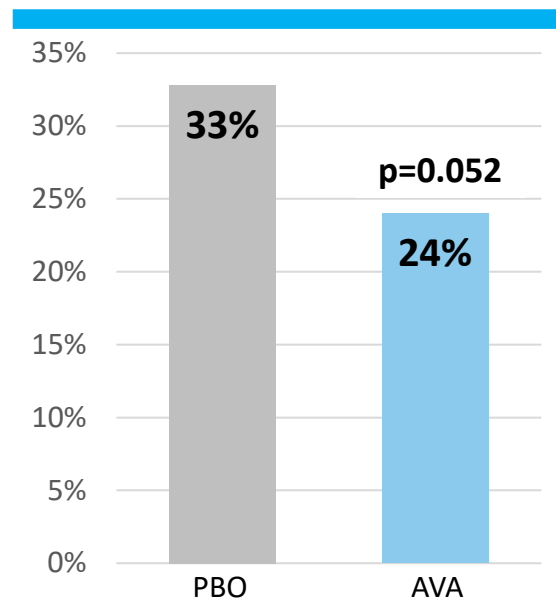
## SOM days

**56%** Reduction in Median SOM Days



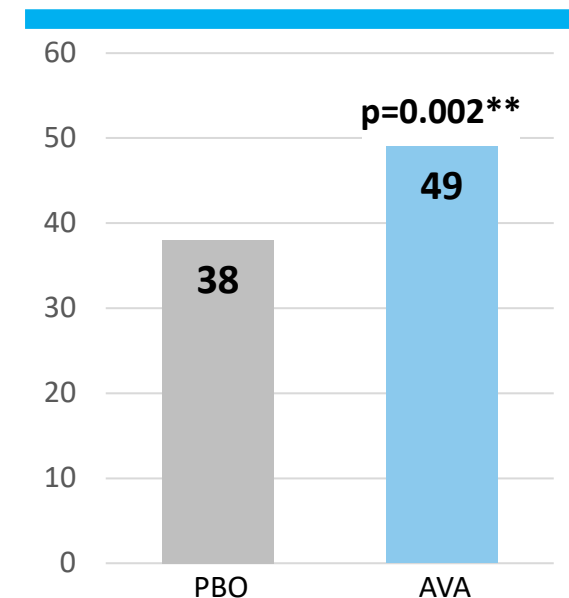
## Grade 4 incidence

**27%** Reduction in Gr. 4 OM Incidence



## SOM onset

**29%** Delay in median days to 1<sup>st</sup> SOM



\*Statistical significance per statistical analysis plan for this Phase 3 trial

\*\*Time to Onset was an exploratory endpoint. OM = oral mucositis; SOM = severe OM.

PBO = Placebo n=166

AVA = Avasopasem n=241

ITT population

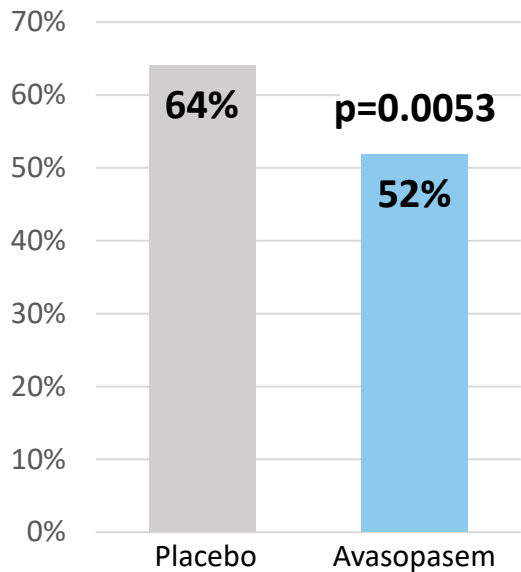


# Meta-analysis of the Two Randomized Trials (n=551)

Avasopasem SOM improvement consistent across trials and key parameters

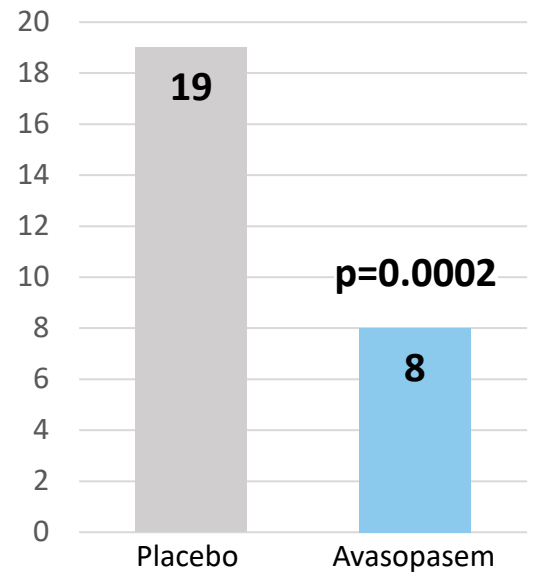
## SOM incidence

**19%** Reduction in SOM Incidence



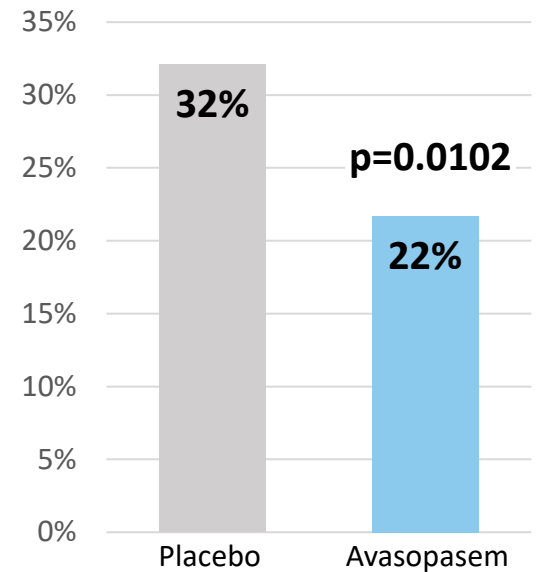
## SOM days

**58%** Reduction in Median SOM Days



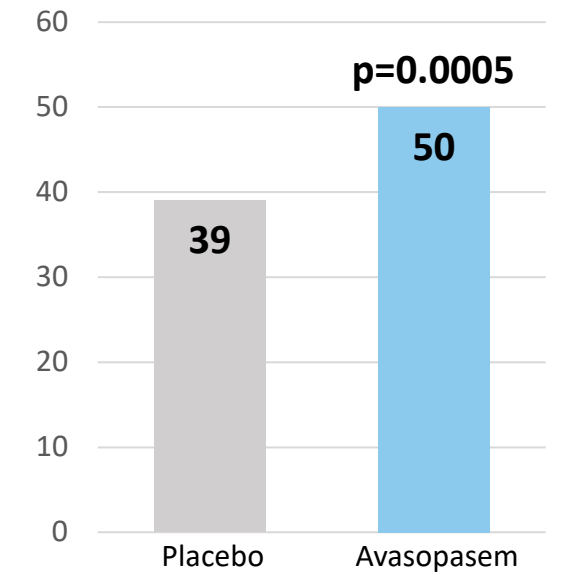
## Grade 4 incidence

**32%** Reduction in Gr. 4 OM Incidence



## SOM onset

**28%** Delay in median days to 1<sup>st</sup> SOM



\*Nominal p values for all endpoints, calculated according to prespecified statistical analysis plan (SAP) for the meta-analysis

OM = oral mucositis; SOM = severe OM.

PBO = Placebo n=238

AVA = Avasopasem n=313



# Reduced Narcotic and Feeding Tube Usage

Avasopasem reductions in SOM appeared to decrease utilization

## Narcotics

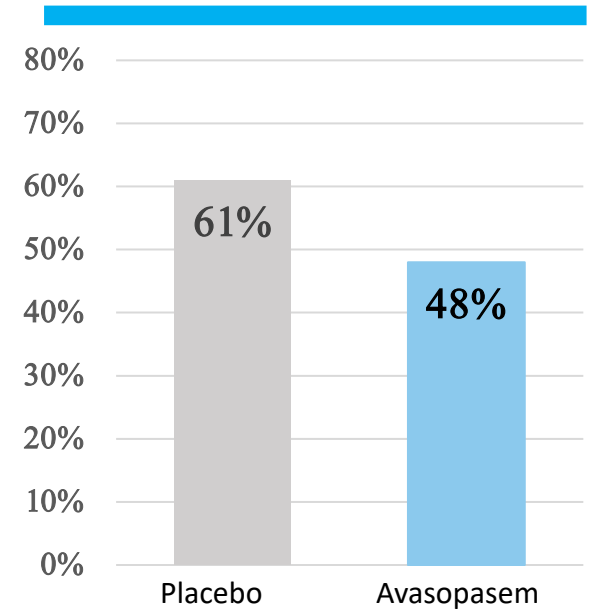
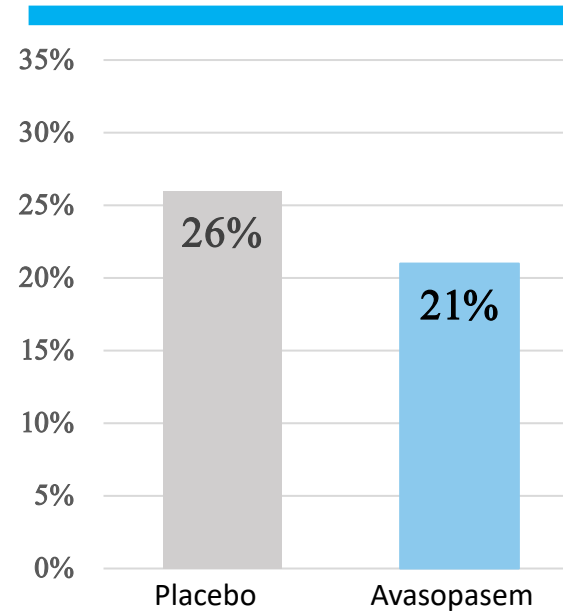
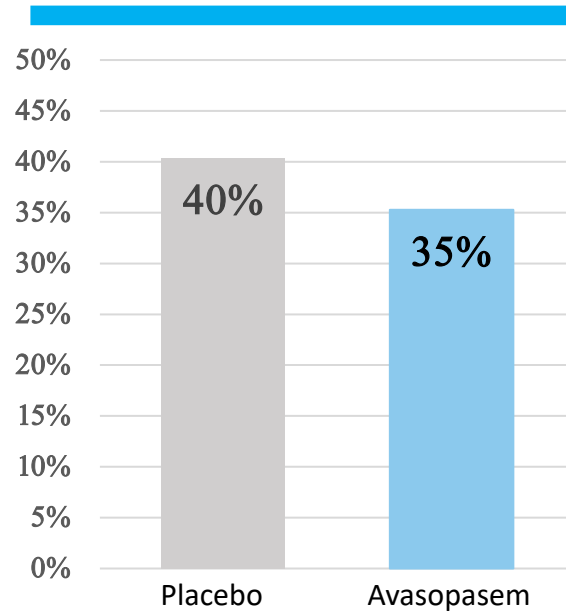
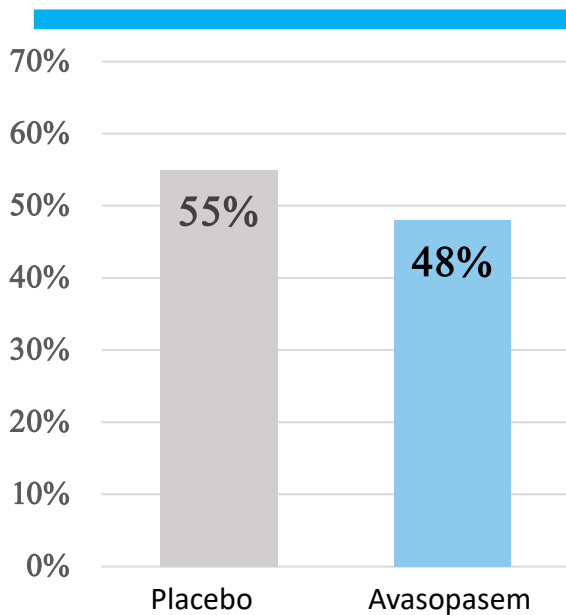
## Gastrostomy (Feeding) Tubes

**13%** ↓ Reduction in usage after RT start

**13%** ↓ Reduction in usage for Ompain

**19%** ↓ Reduction in placements after RT start

**21%** ↓ Reduction in overall utilization



OM, oral mucositis; RT, radiation therapy; SOM, severe OM.

PBO = Placebo n=166

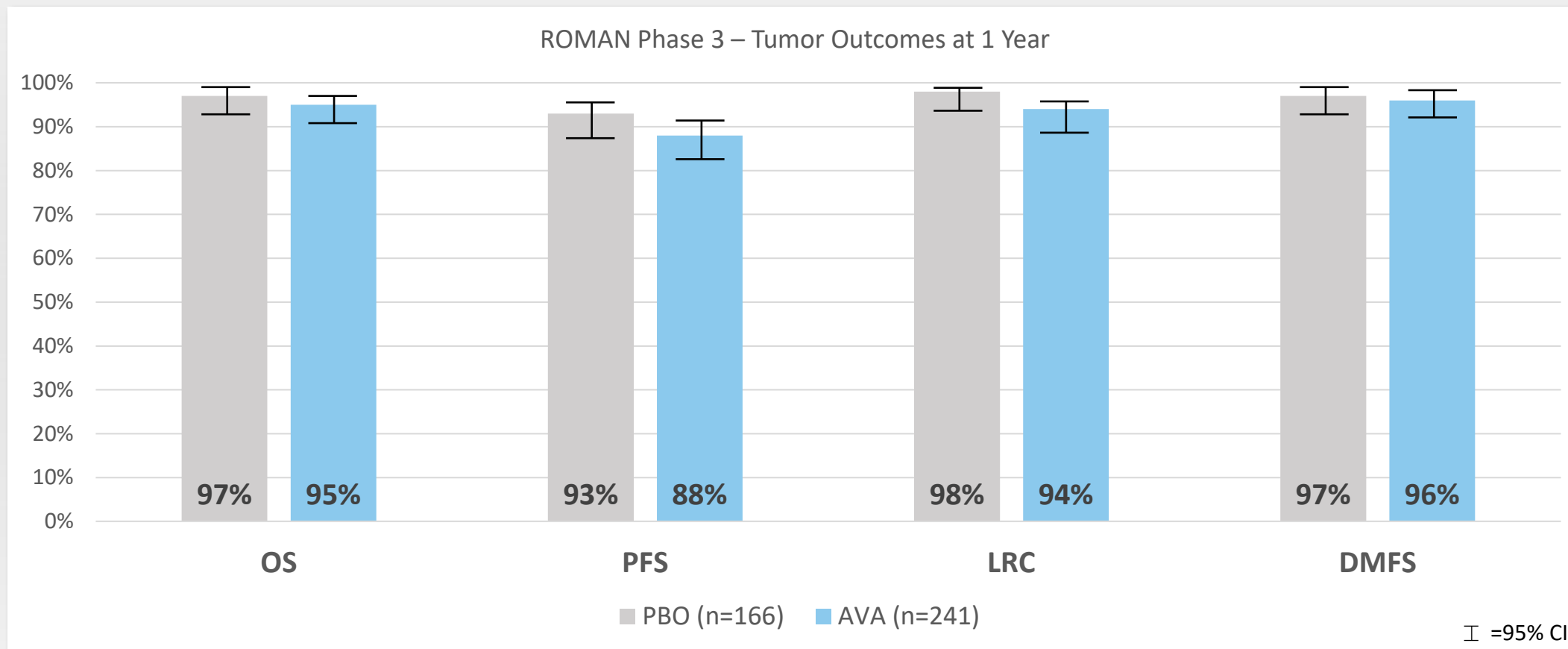
AVA = Avasopasem n=241

ITT population



# Tumor Outcomes 1 Year after Chemoradiotherapy

Overlapping 95% Confidence Intervals – consistent with Phase 2b tumor outcomes at 1 year\*



AVA, avasopasem Mn; CRT, chemoradiotherapy; DMC, distant metastasis control; LRC, locoregional control; OS, overall survival; PFS, progression-free survival; PBO, placebo.

\* Two-Year Tumor Outcomes of Phase 2B... Anderson CM et al. Int J Radiat Oncol Biol Phys. 2018 Feb 1;100(2):427-435

ITT population



# Cisplatin-related Kidney Injury



# Avasopasem Mitigates Kidney Injury

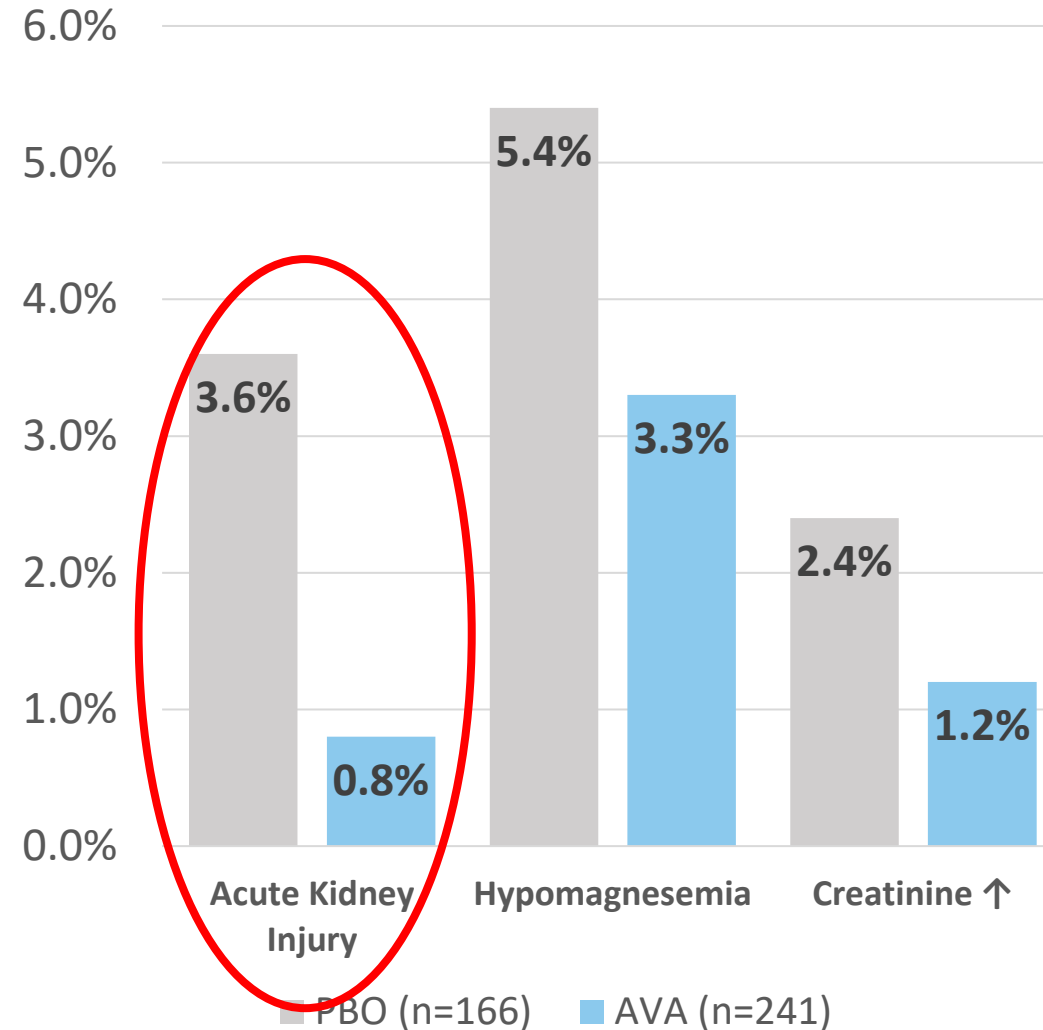
- Superoxide drives cisplatin nephrotoxicity
  - Mapuskar, *Antioxid* 2021
- Avasopasem preclinically prevented cisplatin acute kidney injury
  - Mapuskar, *Antioxid* 2018
- Retrospective analysis of Phase 2b subset suggested chronic kidney disease prevention
  - Steinbach, *ASCO* 2020

AVA, avasopasem Mn; Cis, Cisplatin; PBO, placebo.

CKD defined by Nat. Kidney Foundation as eGFR (estimated Glomerular Filtration Rate) < 60 mL/min/1.73 m<sup>2</sup> (approx. the % of normal kidney function that is working)



# ROMAN: Renal Grade 3+ AEs



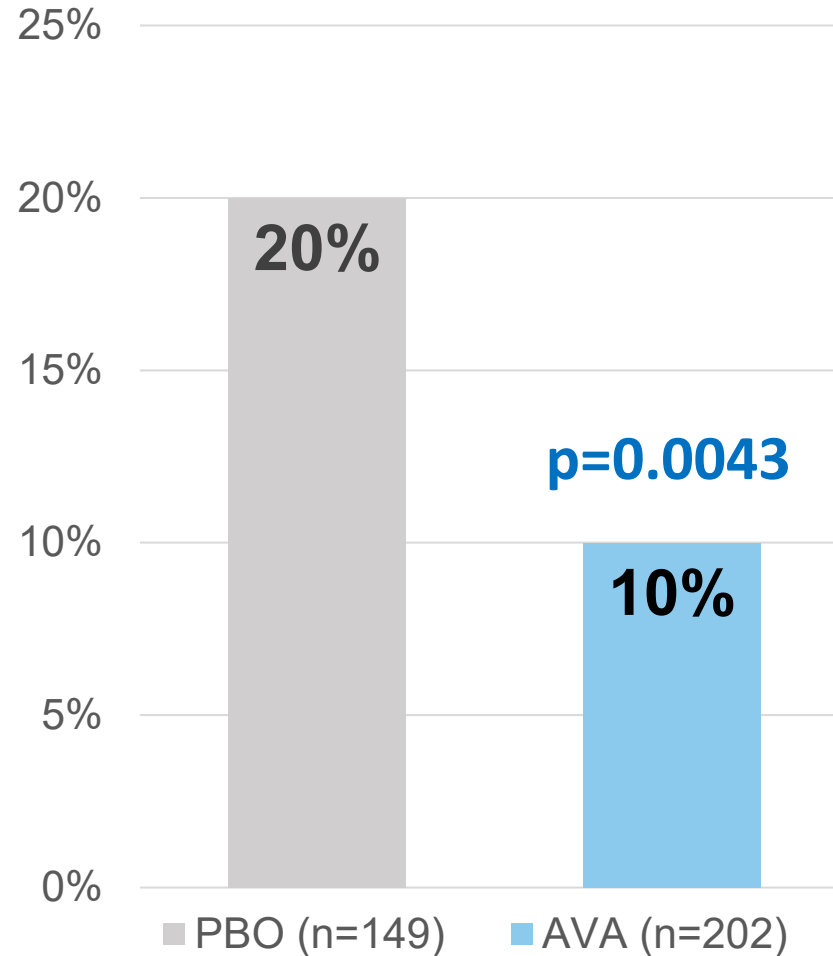
ITT population





# 1 Year Chronic Kidney Disease (CKD) Outcomes

Avasopasem halved predefined endpoint: CKD (<60 mL/min/1.73m<sup>2</sup>)



ITT population



# Conclusions

- Avasopasem demonstrated statistically significant and clinically meaningful reductions in SOM across key parameters of patient burden
- ROMAN results confirm SOM benefits in prior phase 2b trial
- Meta-analysis of both reinforces the consistency of benefit
- Comparable safety across arms
- Tumor control and overall survival comparable after one-year follow-up
- Cisplatin-induced CKD halved by avasopasem at 1 Year follow-up
- Galera plans to submit NDA to FDA by end 2022

FDA, United States Food and Drug Administration; HNC, head and neck cancer; NDA, new drug application; OM, oral mucositis; SOM, severe OM.



# Thank you



*For more information, contact:*

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