Comparison of Pharmacokinetic Profiles and Safety of Surufatinib in Patients from China and the United States

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Introduction

- Surufatinib is a novel, oral, targeted inhibitor of tyrosine kinases VEGFR1, 2, & 3, FGFR1, and CSF-1R.
- Two randomized placebo controlled phase 3 trials in advanced neuroendocrine tumor (NET) patients are complete. Both trials stopped per a pre-planned interim analysis showing superior efficacy of surufatinib over placebo.
 - ✓ SANET-ep (NCT02588170)
 demonstrated superior efficacy in patients with advanced extra-pancreatic neuroendocrine tumors.
 □ Median progression free survival 9.2 vs. 3.8 months.
 - SANET-p (NCT02589821)
 demonstrated superior efficacy in patients with advanced pancreatic neuroendocrine tumors).
 Results pending disclosure at upcoming scientific conference.
 Overall safety and efficacy is consistent with previously disclosed surufatinib data
- Genetic differences leading to potential disparate metabolism in different patient populations are unknown.
- We report a comparison of pharmacokinetic (PK) and safety data across populations treated with surufatinib.

Methods

- Two trials are compared to evaluate potential effects of race on surufatinib exposure.
 - → A phase I/II study of surufatinib (NCT02267967) conducted in China
 - → A phase I/Ib study of surufatinib (NCT02549937) conducted in the United States (US)
- Both trials treated patients at the recommended phase 2 dose (RP2D) of 300 mg QD.
- Three tumor types including Pancreatic NET, extra-pancreatic NET, and Biliary Tract Cancer.

PK Collection Timepoints

- NCT02267967 (conducted in China): Dense PK samples obtained on days 1 and 14, (n=81 patients).
- NCT02549937 (conducted in US): Dense PK samples obtained on days 1, 8, 15, and 29, (n= 39 patients).
 29 (74.3%) Caucasian, 2 (5.1%) Asian, and 8 (20.5%) not reported.
- PK parameters were determined using non-compartmental analysis.

PK Results

PK Exposure of Surufatinib (following 300mg QD dosing) in Chinese Patients Compared to US Patients

	C _{max} geometric mean (%CV)		AUC _{tau} geometric mean (%CV)		
	Chinese patients (n=81)	US patients (n=39)	Chinese patients (n=81)	US patients (n=39)	
Day 1	376 (70%)	354 (61%)	2770 (56%)	3050 (56%)	
	ng/mL	ng/mL	hr*ng/mL	hr*ng/mL	
Day	487 (65%)	471 (59%)	4810 (58%)	5130 (50%)	
14/15	ng/mL	ng/mL	hr*ng/mL	hr*ng/mL	

- Following a single dose of surufatinib 300 mg on day 1 and steady state on day 14/15.
 - → C_{max} and AUC_{tau}: less than 10% difference between Chinese and US populations.
- In US patients, surufatinib geometric mean C_{max} and AUC_{tau} on day 29 were 443 ng/mL and 4670 hr*ng/mL, respectively, and similar to those on days 14/15.

[%]CV: percent coefficient of variation of geometric mean

Safety Results

- Treatment-related adverse events (TRAE) observed in 100% of Chinese patients and 79.5% of US patients
 ✓ Most common TRAE's reported
- Serious adverse events were reported in 27% of Chinese patients and 23.7% of US patients
- Relative Mean Dose intensity:

→ Chinese patients: 90%

→ US patients: 84%

Median Dose intensity:

→ Chinese patients: 97%

→ US patients: 96%

Most Commonly Reported TRAE's in Chinese Patients Compared to US Patients

	Chinese Patients (n=81)		US Patients (n=39)	
	All Grade	≥ Grade 3	All Grade	≥ Grade 3
Proteinuria	81%	12%	12.8%	5.1%
Diarrhea	72%	6%	28.2%	7.7%
Hypertension	60%	33%	38.5%	23.1%
Nausea	17%	-	20.5%	2.6%
Fatigue	-	-	17.9%	5.1%

Conclusions

- Similar PK and toxicity profiles of surufatinib observed between Chinese and US patients
- Data suggest that race has no clinically meaningful impact on surufatinib PK exposure
- Further evaluations of safety and efficacy are being conducted in global studies

Thank you to all of our patients, their families and participating site staff for their time and efforts in these trials

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