



High efficacy and excellent safety profile of Actlycabtogene autoleucel, a humanized CD19 CAR-T product in r/r B-cell malignancies: A phase II pivotal trial

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INTRODUCTION AND AIM

- Commercially approved CD19 CAR-T cell therapies are effective in r/r B cell malignancies but are associated with significant albeit manageable toxicities.
- These toxicities contribute to significant morbidity.
- We have developed a novel, humanized CD19 CAR-T cell therapy, Actlycabtogene autoleucel (Actlycel) and previously reported the safety in Phase I study (Jain H et al., 4641 ASH 2022)
- Here, we present the pooled results from Phase I and Phase II study evaluating Actlycel.
- Recently received market authorization by regulatory authorities of India (Brand name: NexCAR19).

MATERIALS AND METHODS

- Manufacturing Site: Immunoadoptive Cell Therapy Pvt. Ltd (ImmunoACT)
- Clinical Trial Sites: Tata Memorial Hospital, DMHRC, AOI, RGCI, SMBT hospital.

	Phase I	Phase II
Study Setting	Single -Centre	Multi centric
Population	High Grade Lymphoma	r/r B Cell Malignancies
Primary Objective	Safety and tolerability	Objective response rate
Dose	1 x 10 ⁹ to 2 x 10 ⁹	≥ 5 x 10 ⁶ /kg
CTRI Registration	CTRI/2021/04/032727	CTRI/2022/12/048211

- Patients above the age of 15 with ECOG status 0-1, adequate organ function and no CNS involvement were screened for the study.
- Patients with relapsed/ refractory B-cell malignancies were included in the study.
- A lymphodepleting chemotherapy regimen of Fludarabine at 30mg/m²/day and cyclophosphamide at 500 mg/m²/day was administered.
- After 2 days rest period the patients were infused on day 0 with Actlycel.
- The response assessment was scheduled at day 28.

RESULTS

Table 1: Baseline Characteristics

Baseline Characteristics	Patients (N = 64)
Age Median (Range)	44 (16-71)
Gender n (%)	
Male	50 (78%)
Female	14 (22%)
ECOG	
0	2 (3%)
1	60 (94%)
2	2 (3%)
Diagnosis	
R/R DLBCL	43 (67%)
B-ALL	17 (27%)
Indolent lymphoma	4 (6%)

Disease Status at enrolment (Lymphoma)

PD	43 (92%)
PR	2 (4%)
SD	2 (4%)

Disease Status at enrolment (Leukaemia)

Relapsed	2 (12%)
Refractory	15 (88%)

Bulky Disease (>= 7cm) n(%)

10 (21%)

Blast%, median (range)

61% (5-98)

Line of therapies Median (range)

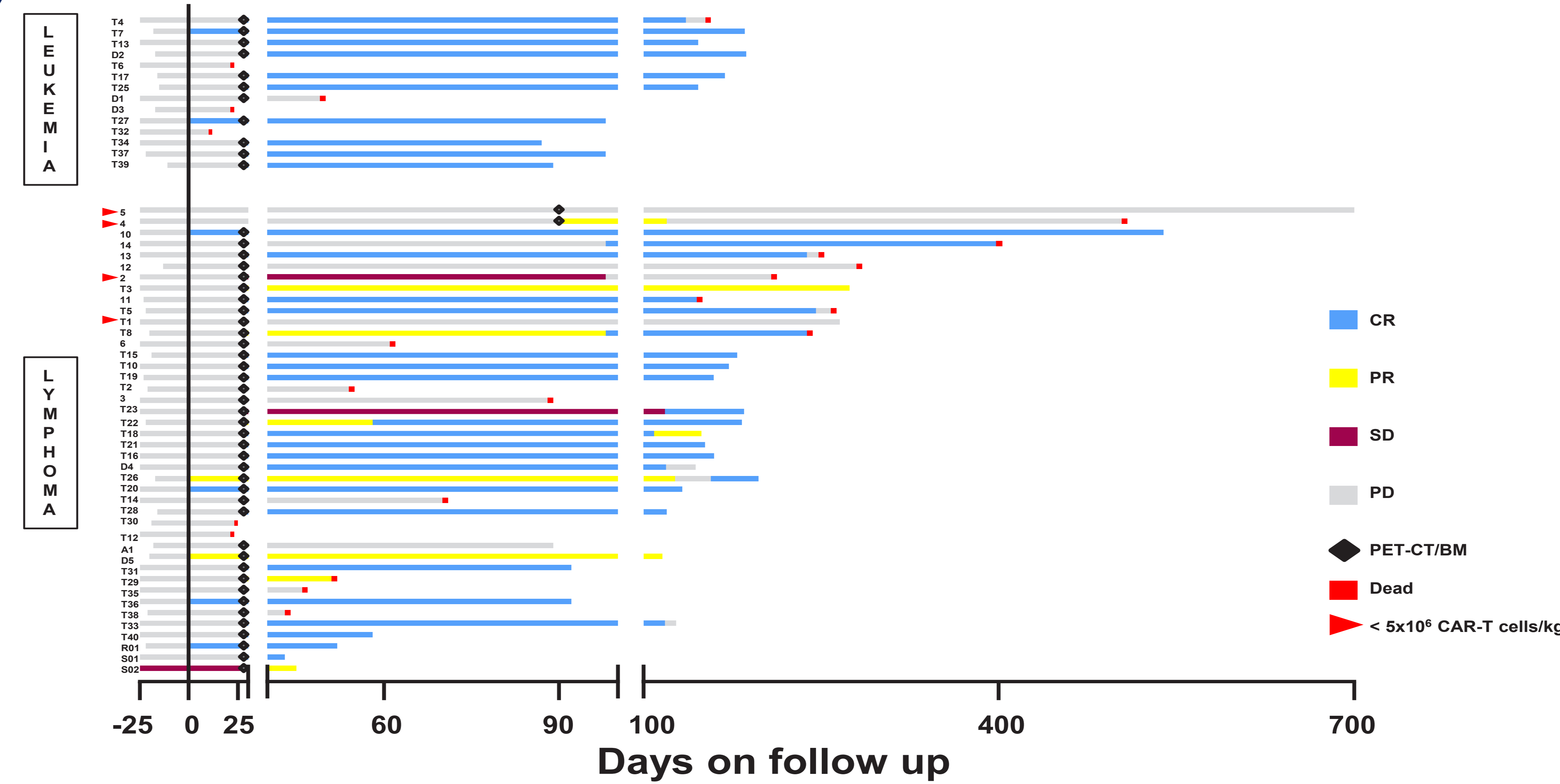
2 (1-6)

Extranodal sites n (%)

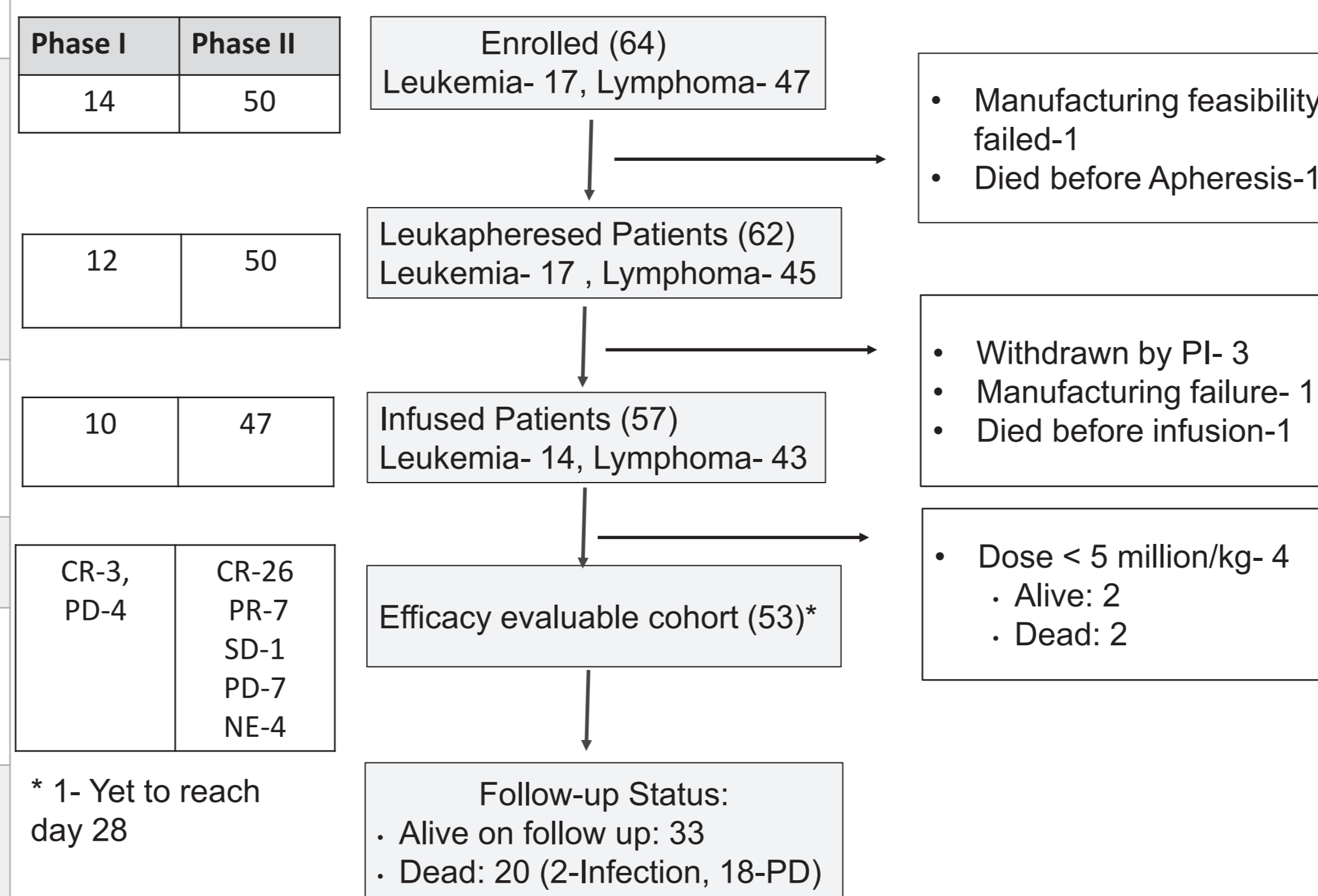
1	12 (25%)
>=2	12 (25%)

CONCLUSIONS

- Actlycel (NexCAR19) is highly effective with a very favorable safety profile in relapsed/refractory B-cell malignancies.
- The absence of ICANS, shorter duration of cytopenias and a lower incidence of grade 3/4 CRS makes it one of the safest CD19 CAR-T cell therapy products.
- Actlycel (NexCAR19) can improve the ease of delivery of CAR T-cell therapy in a wide-range of settings.



Bridging therapy : T4,T7,T13,T6,T27,T32,T10,T21,D1,D2,D3,D4,T20,T14,T20,T30,T29,T35,T36,T40,S01,S02,3,10,11,14
Other therapy : T17,T14,12,14,T1,A01
Reinfusion of Actlycel : 4,14,12,T8,T26,D4



* 1- Yet to reach day 28

- Manufacturing feasibility failed-1
- Died before Apheresis-1

- Withdrawn by PI- 3
- Manufacturing failure- 1
- Died before infusion-1

- Dose < 5 million/kg- 4
- Alive: 2
- Dead: 2

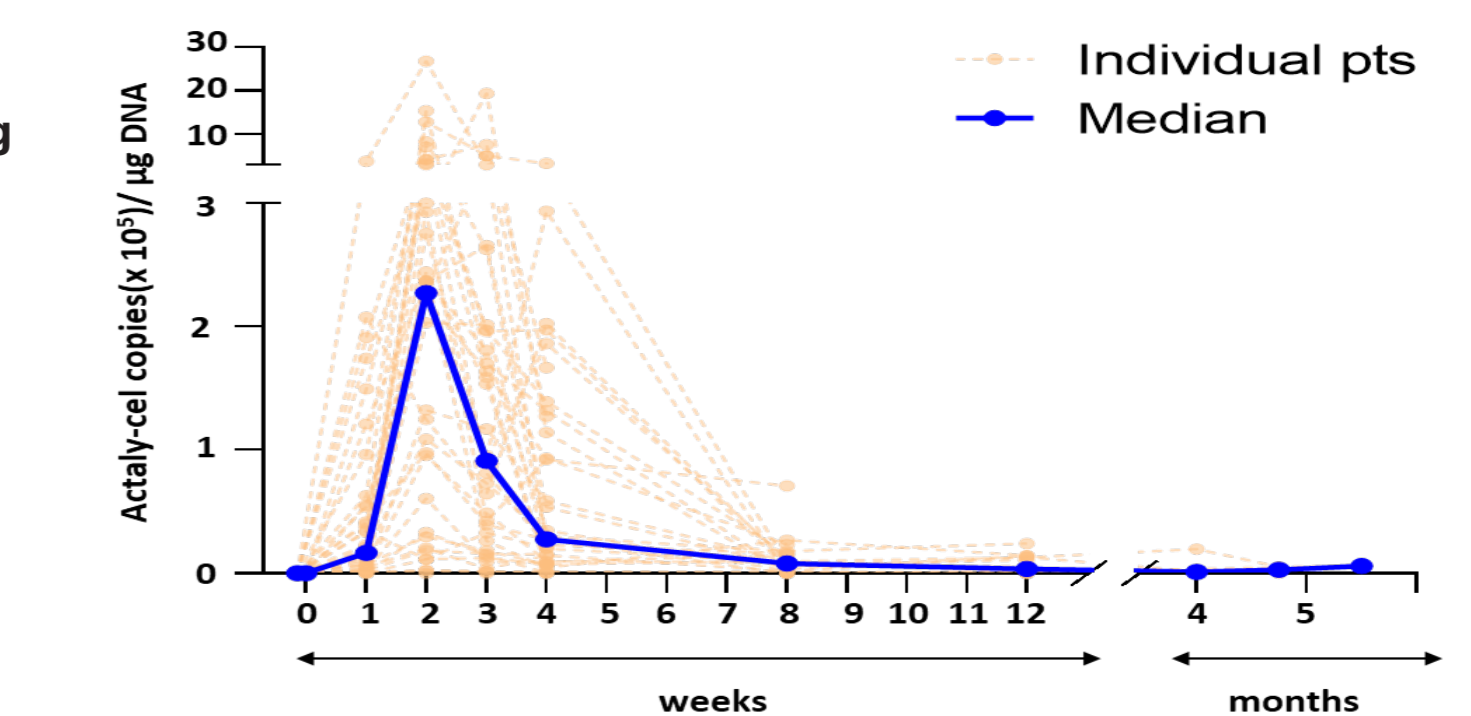
Table 2: Toxicities & responses

Toxicities	N = 57
Adverse Events of Special Interest	
Cytokine Release Syndrome (Grade I/II)	40 (70%)
Cytokine Release Syndrome (Grade III)	3 (5%)
ICANS	0 (0%)
Hypogammaglobulinemia	21 (37%)

Responses

	Efficacy Evaluable Cohort (n=53)	Lymphoma (n= 38)	Leukemia (n=15)*
ORR	36 (67%)	26 (68%)	10 (72%)
CR	29 (52%)	19 (37%)	10 (72%)
PR	7 (15%)	7 (18%)	0 (0%)
SD	1 (2%)	1 (3%)	0 (0%)
PD	11 (23%)	9 (24%)	2 (14%)
NE	4 (8%)	2 (5%)	2 (14%)

Actlycel showed robust in vivo expansion and persistence



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