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Relatlimab (RELA) + nivolumab (NIVO) vs. NIVO in previously untreated metastatic or unresectable melanoma: Additional efficacy in RELATIVITY-047

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Background

RELATIVITY-047 (NCT03470922) evaluated RELA (a LAG-3-blocking antibody) + NIVO as a fixed-dose combination (FDC) vs NIVO in pts with advanced melanoma. The FDC demonstrated superior progression-free survival (PFS) by blinded independent central review in the intent-to-treat (ITT) population with a well-tolerated safety profile and no unexpected safety signals. In this exploratory analysis, we describe the potential benefit in subgroups and beyond initial treatment.

Methods

Pts in RELATIVITY-047 were randomized 1:1 to RELA 160 mg + NIVO 480 mg FDC or NIVO monotherapy 480 mg intravenously every 4 weeks. Treatment continued until progression, unacceptable toxicity, or withdrawal of consent. PFS was assessed across subgroups. PFS2 was defined as the time from randomization to progression on subsequent therapy or death per investigator assessment. Treatment-free time from last study dose to subsequent therapy was also assessed.

Results

714 pts were randomized to RELA + NIVO FDC (n = 355) or NIVO (n = 359). RELA + NIVO FDC extended PFS across prespecified subgroups, including BRAF, AJCC v8 M stage, and LDH. Median treatment duration was 5.6 mo for RELA + NIVO FDC and 4.9 mo for NIVO and 237 (66.8%) and 233 pts (64.9%), respectively, discontinued treatment, mainly due to disease progression (36.3% vs 46.0%). Pts receiving subsequent systemic therapy in RELA + NIVO FDC and NIVO were 27.9% and 29.8%, respectively, including PD-1 or CTLA-4 inhibitors (9.0% vs 12.8%) and BRAF/MEK therapies (11.5% vs 13.9%). PFS2 favored RELA + NIVO FDC with a median not reached (95% CI 21.8–NA) vs 20.0 mo (95% CI 15.4–25.1) for NIVO (hazard ratio [HR] 0.77 [95% CI 0.61–0.97]). Median treatment-free time from last study dose to subsequent therapy was 3.98 mo (95% CI 2.10–7.43) for RELA + NIVO FDC vs 1.45 mo (95% CI 1.25–1.71) for NIVO (HR 0.63 [95% CI 0.48–0.83]).

Conclusions

RELA + NIVO FDC had demonstrated prolonged PFS in ITT and subgroups of pts with previously untreated metastatic or unresectable melanoma. Pts on RELA + NIVO FDC had enduring benefit beyond initial treatment and prolonged benefit beyond first progression, including longer time to initiation of subsequent treatment.

Clinical trial identification

NCT03470922.

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Legal entity responsible for the study

Bristol-Myers Squibb.

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Disclosure

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