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**First-in-human phase I study of TCR-T therapy targeting KRAS G12V in metastatic solid tumors**

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**Background**

About 10% of colorectal cancers (CRC) and 30% of pancreatic cancers (PC) harbor the KRAS p.G12V mutation, a critical driver of tumorigenesis. To date, no clinical data have been reported for TCR-engineered T cell therapies targeting this mutation. NW-301V is a novel TCR-T therapy composed of autologous T cells transduced with a naturally selected TCR specific for the KRAS p.G12V neoantigen presented by HLA-A\*11:01. In addition, NW-301V T cells co-express the CD8 $\alpha\beta$  co-receptor to further enhance functionality. Here, we present initial findings from the first-in-human, investigator-initiated phase 1 study of NW-301V in patients (pts) with metastatic CRC and PC.

**Methods**

The study uses a modified 3+3 design with 3 dose levels (DLs): 3e8 (2-5e8), 1.5e9 (1-4e9) and 7.5e9 (5-12e9) transduced CD8 T cells. Pts undergo apheresis for NW-301V manufacture, and lymphodepletion (LD) with fludarabine (30mg/m<sup>2</sup>/day) and cyclophosphamide (500mg/m<sup>2</sup>/day) for 3 days, prior to NW-301V infusion. Low-dose IL-2 (500,000 IU) is administered s.c. twice a day for 10 days post infusion. Primary objectives are to assess the safety, tolerability, and determine MTD and RP2D. Secondary objectives include evaluating PK and preliminary efficacy.

**Results**

As of Feb 28th, 2025, DL1 and DL2 enrollment have completed. 8 pts (median age 57 yrs) have been treated, including 4 at DL1 (all PCs) and 4 at DL2 (all CRCs). The pts had received a median of 3 prior systemic therapies. NW-301V was well tolerated with most adverse events being hematological toxicities related to LD. Two pts had Grade 1-2 CRS. No ICANS, DLTs, or deaths have been observed. According to RECIST 1.1, the best overall responses were evaluated as PR in 3 pts (1 PC at DL1 and 2 CRCs at DL2), SD in 2 pts (both CRC at DL2) and PD in 3 pts (all PCs at DL1). Overall response rate was 37.5% (3/8) across both DLs and 50% (2/4) at DL2. Disease control rate was 62.5% (5/8) across both DLs and 100% (4/4) at DL2. In 2 pts, responses deepened from SD at week 4 to PR at week 8. All PRs and SDs lasted >3 months.

**Conclusions**

Initial results confirm that NW-301V demonstrates a favorable safety profile and promising anti-tumor activity in KRAS G12V-mutated PCs and CRCs. Ongoing dose escalation aims to further assess anti-tumor efficacy at higher doses and establish the RP2D.

**Legal entity responsible for the study**

The First Affiliated Hospital, Zhejiang University School of Medicine, Hangzhou, China.

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**Disclosure**

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