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Intracranial efficacy of olomorasib, a second-generation KRAS G12C inhibitor, in patients with KRAS G12C-mutant NSCLC who have active, untreated brain metastases

P. Cassier¹, J. Schneider², A. Italiano³, A. Hollebecque⁴, R. Heist⁵, T. Shimizu⁶, S.Y. KIm⁷, A.I. Spira⁸, R. Cosman⁹, G. Sherwood¹⁰, S.A. Patel¹¹, Y-C. Kim¹², W. Iams¹³, M. Khalil¹⁴, A. Fink¹⁵, Y. Lin¹⁶, M.D. Willard¹⁷, M.A. Socinski¹⁸

¹ Department of Medical Oncology, Centre Léon Bérard, Lyon, France, ² Thoracic Oncology, NYU Langone Hospital, New York, United States of America, ³ Early Phase Trials Unit, Institute Bergonié - Centre Régional de Lutte Contre le Cancer (CLCC), Bordeaux, France, ⁴ DITEP, Institut Gustave Roussy, Villejuif, France, ⁵ Medical Oncology Department, MGH - Massachusetts General Hospital, Boston, United States of America, ⁶ Department of New Experimental Therapeutics, Kansai Medical University Hospital, Hirakata, Japan, ⁷ Oncology Department, Yale School of Medicine, New Haven, United States of America, ⁸ Research Department, Virginia Cancer Specialist, Fairfax, United States of America, ⁹ Oncology, Advent Health Cancer Institute, Orlando, United States of America, ¹⁰ Oncology, Novant Health Cancer Institute FMC - Forsyth, Winston Salem, United States of America, ¹¹ Internal Medicine, UNC - The University of North Carolina at Chapel Hill - School of Medicine, Chapel Hill, United States of America, ¹² Oncology Department, Chonnam National University Medical School & Chonnam National University Hwasun Hospital, Hwasun, Republic of Korea, ¹³ Oncology, Vanderbilt Ingram Cancer Center, Nashville, United States of America, ¹⁴ Department of Medicine, The University of Alabama at Birmingham, Birmingham, United States of America, ¹⁵ Oncology, Eli Lilly and Company, Indianapolis, United States of America, ¹⁶ Oncology, Eli Lilly and Company, New York, United States of America, ¹⁷ Early Phase Development - Medical, Eli Lilly and Company - Global Headquarters, Indianapolis, United States of America¹⁸ Oncology Department, Advent Health Cancer Institute, Orlando, United States of America

Background

Olomorasib, a potent and highly selective second-generation inhibitor of GDP-bound KRAS G12C has demonstrated preliminary intracranial (IC) activity in patients (pts) with brain metastases (mets). Brain mets are associated with poor prognosis and occur in 25-42% of pts with KRAS G12C-mutant NSCLC. Here we present updated results on the IC efficacy of olomorasib in pts with KRAS G12C-mutant NSCLC with active, untreated brain mets from the phase I/II LOXO-RAS-20001 (NCT04956640) study.

Methods

ECOG 0-1 and KRAS G12C inhibitor-naïve pts with advanced NSCLC positive for *KRAS* G12C (tissue or plasma) with active, untreated brain mets received single agent olomorasib (150 mg BID). Safety was assessed in all treated pts. IC response by modified RECIST v1.1 in \geq 1 measurable (\geq 5 mm) IC lesion was evaluated in pts with at least one post-baseline response assessment or who discontinued treatment before the first assessment.

Results

As of 15 January 2025, 19 pts (median age 65 yrs, range 42-80) were treated. 15 pts had prior systemic therapy - 13 pts in the metastatic setting; 8 pts had \geq 2 lines of therapy. Median number of IC target lesions was 1 (range, 1-3). Safety was consistent with previous reports of olomorasib. The most common TRAEs (>15%) were low-grade diarrhea, fatigue and nausea; no grade \geq 3 TRAEs were observed. Among the 18 efficacy-evaluable pts, IC objective response rate was 44.4% (8/18 pts; 95% CI: 21.5-69.2; 1 CR, 5 PR, 2 uPR pending/ongoing) and disease control rate was 83.3% (15/18 pts; 95% CI, 58.6-96.4; 7 SD). Median time to IC response was 2.0 months (range 1.3-3.9) and median duration of response and progression-free survival were not yet reached (5.4 months median follow-up for IC response; 95% CI, 2.79-NE).

Conclusions

Olomorasib continues to demonstrate promising IC activity and disease control in pts with KRAS G12C-mutant NSCLC and active, untreated brain mets. These results support continued clinical development of olomorasib in pts with KRAS G12C-mutant NSCLC including in pts with brain mets. Two global registrational studies investigating olomorasib in combination with immunotherapy in first-line metastatic and early-stage NSCLC are ongoing (NCT06119581, NCT06890598).

Clinical trial identification

NCT04956640.

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Legal entity responsible for the study

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Disclosure

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Italiano: Financial Interests, Personal, Advisory Board: Bayer, Roche, Philips, Chugai, GSK; Financial Interests, Institutional, Coordinating PI: Bayer, AstraZeneca, Roche, MSD, Ipsen, Merck. A. Hollebecque: Financial Interests, Personal, Invited Speaker: Servier, Incyte, Eisai, BMS; Financial Interests, Personal, Advisory Board: Basilea, Taiho, Relay Theraeutics, QED Therapeutics, Debiopharm, MSD, Boehringer Ingelheim; Financial Interests, Institutional, Other, Travel: Amgen; Financial Interests, Personal, Advisory Board, Advisory board: Sanofi; Financial Interests, Personal, Invited Speaker, TAT meeting: Seagen; Financial Interests, Personal, Other, ASCO: Pierre Fabre; Financial Interests, Institutional, Funding: Incyte: Financial Interests, Institutional, Research Grant: AstraZeneca: Non-Financial Interests. Principal Investigator, M19-345; M21-404: AbbVie; Non-Financial Interests, Principal Investigator, ADP-0033: Adaptimmune; Non-Financial Interests, Other, Travel: Amgen; Non-Financial Interests, Principal Investigator: AstraZeneca; Non-Financial Interests, Principal Investigator, CA120-1001: BMS; Non-Financial Interests, Principal Investigator, BI1403: Boehringer Ingelheim; Non-Financial Interests, Principal Investigator, CC-90011: Celgene/BMS; Non-Financial Interests, Principal Investigator, Herthena, DS7300: Daiichi Sankyo; Non-Financial Interests, Principal Investigator, Garnet: GSK; Non-Financial Interests, Principal Investigator, Tropics-03: Gilead; Non-Financial Interests, Principal Investigator, INCB161734: Incyte; Non-Financial Interests, Principal Investigator, Loxo-IDH; Loxo-RAS: Loxo/Lilly; Non-Financial Interests, Principal Investigator, MK5909: MSD; Non-Financial Interests, Principal Investigator, MCLA-158; MCLA-128: Merus; Non-Financial Interests, Principal Investigator, Krystal-10: Mirati; Non-Financial Interests, Principal Investigator, C4201002; SGNB6A: Pfizer; Non-Financial Interests, Principal Investigator, CLIN-1194: Pierre Fabre; Non-Financial Interests, Principal Investigator, RLY-4008: Relay Therapeutics; Non-Financial Interests, Principal Investigator, C042216; WP42627; C040939; G044479; G042216; G044474: Roche; Non-Financial Interests, Principal Investigator, ACT16902: Sanofi: Non-Financial Interests, Principal Investigator, SGNB6A: Seatle Genetics; Non-Financial Interests, Principal Investigator, SN-201 study: Sotio; Non-Financial Interests, Principal Investigator, SN201: Sotio A.S.; Non-Financial Interests, Principal Investigator, TAS-120-202: Taiho; Non-Financial Interests, Principal Investigator, First-308: Transthera. R. Heist: Financial Interests, Personal, Advisory Board: Daiichi Sankyo, Novartis, EMD Serono, Lilly, AstraZeneca, Regeneron, Sanofi, AstraZeneca, Biohaven, Merck, Amgen, Gilead; Financial Interests, Personal, Writing Engagement: Chugai Roche; Financial Interests, Personal, Other, review of cancer histories: Boehringer Ingelheim; Financial Interests, Personal, Advisory Board, consulting honoraria: AbbVie; Financial Interests, Personal, Other, Consulting: Claim Therapeutics; Financial Interests, Institutional, Local PI: Daiichi Sankyo, Novartis, AbbVie, Roche, Incyte, Mirati, Agios, Corvus, Turning Point, Lilly, Exelixis; Financial Interests, Institutional, Local PI, clinical trial funding to institution, not to self: Mythic, Erasca; Financial Interests, Institutional, Local PI, clinical trial funding: Alterome, AstraZeneca; Non-Financial Interests, Member: IASLC, ASCO, AACR. T. Shimizu: Financial Interests, Personal, Advisory Board: AbbVie, Chordia Therapeutics, Daiichi Sankyo; Financial Interests, Personal, Other, Safety Review Committee: Chugai, IQVIA, Toray; Financial Interests, Personal, Invited Speaker: MSD; Financial Interests, Personal, Advisory Board, Medical Advisor: Kyowa Kirin; Financial Interests, Personal, Advisory Board, Safety Review Committee: Kyowa Kirin; Financial Interests, Institutional, Local PI: AbbVie, Eli Lilly, LOXO Oncology, Novartis, Daiichi Sankyo, Takeda, Bristol Myers Squibb, Eisai, Incyte, AstraZeneca, Pfizer, Chordia Therapeutics, Astellas, Symbio Pharmaceuticals, 3D-Medicine, PharmaMar; Non-Financial Interests, Other, Joint Scientific Committee Review External IRB Member of Phase 1 Trials in Hong Kong, HKSAR, China: HKU/CUHK, HKSAR, China. A. Fink, Y. Lin, M.D. Willard: Financial Interests, Institutional, Advisory Board, Lilly Stock: Eli Lilly. All other authors have declared no conflicts of interest.

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