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Long-term outcomes with tepotinib for clinically relevant subgroups of patients (pts) with MET exon 14 (METex14) skipping NSCLC in the VISION study: A ≥3-year follow-up

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Background

Tepotinib, an oral MET tyrosine kinase inhibitor, is approved for the treatment of advanced/metastatic *MET*ex14 skipping NSCLC in multiple countries. The VISION study showed robust and durable efficacy and safety of tepotinib in pts with ≥3 years follow-up. Here, we report the long-term efficacy of tepotinib in clinically relevant subgroups of pts with ≥3 years follow-up (data cut-off: May 20, 2024).

Methods

Pts with advanced/metastatic *MET*ex14 skipping NSCLC, detected by tissue (T+) and/or liquid biopsy (L+), received tepotinib 500 mg (450 mg active moiety) once daily. Primary endpoint was objective response (RECIST v1.1) by IRC. Subgroup analyses were preplanned; exploratory analysis of brain lesions was conducted using RANO-BM criteria.

Results

Of 313 pts (median age 72.0 years), 41.2% were ≥75 years, 47.6% had history of smoking, and 18.2% had brain metastases at baseline; 208 pts were T+ (first-line [1L]: 111; second-or-later line [2L+]: 97), 178 were L+ (1L: 95; 2L+: 83), and 73 pts were T+/L+. Efficacy outcomes in T+ and L+ pts are presented in the table. L+ pts had shorter time-dependent endpoints, potentially due to a higher baseline disease burden. In pts aged <75 years (n=184), ORR was 55.4% with an mDOR of 19.4 months versus 46.5% and 15.7 months in pts ≥75 years (n=129). Pts with a history of smoking (n=149) had an ORR of 56.4% with an mDOR of 18.0 months, versus 47.4% and 20.8 months in pts without (n=154). Among 57 pts with baseline brain metastases, systemic ORR was 56.1% with an mDOR of 9.0 months, versus 50.8% and 19.4 months in pts without (n=256). In pts with brain tumors as target lesions evaluable by RANO-BM (n=15), intracranial ORR was 66.7% with a DCR of 86.7%. Table: 1996P

Tepotinib efficacy	ORR*, %	mDOR*, mo	mPFS*, mo	mOS*, mo
T+ (n=208)	54.8 (47.8, 61.7)	17.4 (12.4, 31.7)	13.7 (11.0, 17.1)	22.3 (18.8, 25.9)
1L T+ (n=111)	59.5 (49.7, 68.7)	31.7 (15.2, 53.7)	15.9 (11.0, 33.1)	24.6 (18.8, 31.6)
2L+ T+ (n=97)	49.5 (39.2, 59.8)	12.4 (8.3, 18.0)	11.5 (8.2, 14.7)	19.7 (17.0, 24.5)
L+ (n=178)	51.7 (44.1, 59.2)	15.2 (9.7, 33.6)	8.9 (7.8, 11.0)	17.6 (12.6, 21.3)
1L L+ (n=95)	58.9 (48.4, 68.9)	17.4 (8.3, 46.4)	10.3 (8.0, 16.5)	17.6 (10.4, 23.7)

Tepotinib efficacy ORR*, %	mDOR*, mo	mPFS*, mo	mOS*, mo
2L+ L+ (n=83)	43.4 (32.5, 54.7)	12.4 (8.4, 33.6)	8.2 (5.7, 11.0)
			16.2 (12.0, 21.0)

*95% CI values in parentheses. DOR, duration of response; m, median; mo, months; ORR, objective response rate; OS, overall survival; PFS, progression-free survival.

Conclusions

Tepotinib continued to show robust and durable efficacy in pts with ≥ 3 years follow-up, irrespective of T+/L+ status, age, smoking status, or brain metastases at baseline, consistent with previously reported findings of the overall population.

Clinical trial identification

NCT02864992.

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Legal entity responsible for the study

Merck Healthcare KGaA, Darmstadt, Germany.

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Disclosure

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