BERLIN 2025 ESMO congress

2690MO

Extended efficacy and safety from the phase III MANEUVER trial of pimicotinib in patients with tenosynovial giant cell tumour (TGCT)

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Background

TGCT is a rare, benign, locally aggressive synovial tumour driven by overexpression of colony stimulating factor-1 (CSF-1). Pimicotinib is an oral, once daily, highly selective, and potent CSF-1 receptor inhibitor. The global Phase 3 MANEUVER trial met its primary endpoint; pimicotinib significantly improved objective response rate (ORR) at Week 25 vs placebo (54.0% vs 3.2% [p<0.0001]) (NCT05804045; Niu et al. ASCO 2025).

Methods

In MANEUVER, patients were randomized 2:1 to receive pimicotinib 50 mg once daily or placebo for 24 weeks (Part 1); at Week 25 patients continued or switched over to pimicotinib for 24 weeks (Part 2), followed by an extension phase (Part 3). Here, we report extended efficacy (including clinical outcome assessments [COAs] assessed at the end of Part 2) and safety outcomes (data cutoff: 12 March 2025).

Results

At baseline, median age was 40 years (range: 18–69); 68.1% of patients were female; 47.9% were located in China. With median follow-up of 62 weeks, patients randomized to pimicotinib in Part 1 (n=63) had an ORR of 76.2% (95% CI 63.8, 86.0) per RECIST v1.1 and 74.6% (95% CI 62.1, 84.7) per tumour volume score, as determined by blinded independent review committee. Median duration of response was not reached (range: 0.03–19.81 months). At the end of Part 2, ongoing improvements were observed for all COAs (Table). No new safety signals emerged; there was no evidence of cholestatic hepatotoxicity or drug-induced liver injury, nor hair/skin hypopigmentation. Four patients (6.3%) discontinued pimicotinib due to a treatment-emergent adverse event. Patients who switched from placebo to pimicotinib (Part 2) derived ORR and COA benefits.Table: 2690MO

Clinical outcome assessments at the end of Part 2 (Week 49) for patients randomized to pimicotinib at baseline

Change from baseline at end of Part 2 (Week 49)	Patients randomized to pimicotinib at baseline Mean (SD)
Active Range of Motion	n=44 16.44 (21.84)
Worst Stiffness Numeric Rating Scale[a]	n=46 −3.70 (1.91)
Brief Pain Inventory worst pain[a]	n=46 −2.56 (1.89)
PROMIS-PF[a]	n=49 6.55 (7.73)

[a]Patient-reported outcomes: PROMIS-PF, Patient-Reported Outcomes Measurement Information System Physical Function; SD, standard deviation

[a]Patient-reported outcome. PROMIS-PF, Patient-Reported Outcomes Measurement Information System-Physical Function; SD, standard deviation.

Conclusions

This extended analysis of MANEUVER demonstrated that tumour responses to pimicotinib continued to improve and are durable, with ongoing improvements in COAs and a consistent safety profile, supporting the timely initiation and long-term treatment of eligible patients with pimicotinib.

Clinical trial identification

NCT05804045 Release date: 13 March 2023 [first submission date to ClinicalTrials.gov].

Editorial acknowledgement

Writing support and editorial assistance provided by Niamh Hunnisett, BSc, of Caudex, an IPG Health Company.

Legal entity responsible for the study

Abbisko Therapeutics Co. Ltd.

Funding

Abbisko Therapeutics Co. Ltd.

Disclosure

H. Gelderblom: Financial Interests, Institutional, Local PI: Deciphera, Sanofi, Servier; Financial Interests, Institutional, Coordinating PI: Boehringer Ingelheim, AmMax Bio, Abbisko. J. Martin-Broto: Financial Interests, Personal, Advisory Board, Honoraria: PharmaMar, Bayer, Roche, Boehringer Ingelheim, Amgen; Financial Interests, Personal, Invited Speaker: PharmaMar; Financial Interests, Personal, Advisory Board, Speaker: Tecnofarma, Asofarma; Financial Interests, Personal, Advisory Board: GSK, Cogent Biosciences; Financial Interests, Personal, Other, Profits: Sarcoma Research Solutions SL; Financial Interests, Institutional, Coordinating PI: PharmaMar, Eisai, Novartis, Immix Biopharma, Lixte, Karyopharm, Bayer, Pfizer, BMS, Lilly; Financial Interests, Institutional, Local PI: Blueprint, Deciphera, Nektar, FORMA, Amgen, Daiichi Sankyo, AROG, Adaptimmune, GSK, Ran Therapeutics, Inhibrx, Ayala Pharmaceuticals, Philogen, Cebiotex, PTC Therapeutics, Inc. and SpringWorks therapeutics, Boehringer Ingelheim, Abbisko, Biosplice. Y. Zhou: Financial Interests, Personal, Speaker's Bureau: BeiGene, Ltd.; Financial Interests, Personal, Research Funding: Abbisko Therapeutics Co. Ltd.. A.R.A. Razak: Financial Interests, Institutional, Research Funding: Abbisko Therapeutics Co. Ltd. S. Stacchiotti: Financial Interests, Personal, Advisory Board: Bayer, Daiichi Sankyo, Ikena, Regeneron, NEC Oncoimmunity AS, Pharma Essentia, Ipsen; Financial Interests, Personal, Other, Travel Coverage to scientific conference: PharmaMar; Financial Interests, Personal, Advisory Board, Advisory board meeting: Agenus; Financial Interests, Personal, Advisory Board, Advisory board meetings: Boehringer; Financial Interests, Personal, Invited Speaker, Lectures: Gentili; Financial Interests, Personal, Advisory Board, Advisory board: Servier; Financial Interests, Institutional, Local PI: Advenchen, Deciphera, Epizyme, Daiichi Sankyo, GSK, Karyopharm, PharmaMar, SpringWorks, Hutchison MediPharma International Inc, Inhibrix; Financial Interests, Institutional, Coordinating PI: Bayer; Financial Interests, Institutional, Funding: Blueprint, Novartis; Financial Interests, Institutional, Other, Co-investigator in clinical study: Boehringer; Non-Financial Interests, Member of Board of Directors, Vice Chair: Connective Tissue Oncology Society; Non-Financial Interests, Advisory Role: Chordoma Foundation, Epithelioid Haemangiondothelioma Foundation, Desmoid Foundation, Epithelioid Hemangioendothelioma (EHE) Rare Cancer Charity (UK); Non-Financial Interests, Other, Secretary: EORTC soft tissue and bone sarcoma group; Non-Financial Interests, Leadership Role, President: Italian Sarcoma Group. C. Serrano: Financial Interests, Personal, Advisory Board: Deciphera Pharmaceuticals, IDRX, CogentBio, Newbay; Financial Interests, Personal, Invited Speaker: PharmaMar, Roche; Financial Interests, Institutional, Research Grant: IDRX; Financial Interests, Institutional, Steering Committee Member: Deciphera, Newbay; Financial Interests, Institutional, Local PI: IDRX, CogentBio; Non-Financial Interests, , Member of Board of Directors: Spanish Group for Sarcoma Research (GEIS), Spanish Society of Medical Oncology (SEOM); Non-Financial Interests, Other, Faculty member: European Society of Medical Oncology (ESMO); Other, Travel Grant: PharmaMar. P. Rutkowski: Financial Interests, Personal, Invited Speaker, honoraria for lectures: MSD, BMS, Pierre Fabre; Financial Interests, Personal, Advisory Board: MSD, BMS, Pierre Fabre, Merck, Sanofi, Blueprint Medicines, Philogen, Medison Pharma, Genesis Pharma; Financial Interests, Personal, Invited Speaker: Merck, Sanofi, Novartis, AstraZeneca, Genesis Pharma; Financial Interests, Institutional, Research Grant, research grant for ISS: Pfizer; Financial Interests, Institutional, Funding, research grant for institution: BMS; Non-Financial Interests, Member of Board of Directors: Polish Society of Surgical Oncology; Non-Financial Interests, Member of Board of Directors, President: Polish Oncological Society. G.G. Baldi: Financial Interests, Personal, Advisory Role: PharmaMar; Financial Interests, Personal, Advisory Board: Eli Lilly, GSK, Merck Sharpe & Dohme, Deciphera; Financial Interests, Personal, Speaker, Consultant, Advisor, Consulting fees: PharmaMar, Eli Lilly; Other, Personal, Other, Honoraria: Pharmamur, Eli Lilly, Merck Sharp & Dohme, Istituto Gentili; Other, Personal, Other, Travel grants: Istituto Gentili, Pharmamur, Eli Lilly. All other authors have declared no conflicts of interest.