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Datopotamab deruxtecan (Dato-DXd) + durvalumab (D) as first-line (1L) treatment (tx) for unresectable locally advanced/metastatic triple-negative breast cancer (a/mTNBC): Final results from the phase lb/ll BEGONIA study

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Background

BEGONIA (NCT03742102) is a 2-part, open-label platform study evaluating the safety and efficacy of D, anti-PD-L1 antibody, combined with novel therapies as 1L tx for a/mTNBC. We report updated data for D in combination with Dato-DXd (a TROP2-directed antibody-drug conjugate) from arm 7 and the first report from arm 8.

Methods

Patients (pts) with unresectable a/mTNBC eligible for 1L tx were enrolled. Arm 7 included pts regardless of tumour PD-L1 expression level. Arm 8 enrolled pts with PD-L1-high tumours, as determined by IHC assay (local test). Pts received Dato-DXd 6 mg/kg IV + D 1120 mg IV Q3W until progression or unacceptable toxicity. Primary endpoints were safety and tolerability. Secondary endpoints included confirmed objective response rate (cORR) assessed by investigator, duration of response (DoR) and progression-free survival (PFS) per RECIST 1.1.

Results

At data cut-off (29 Nov 2024), 62 pts had received Dato-DXd + D (19.4% ongoing study tx) in arm 7 and 33 pts received Dato-DXd + D (45.4% ongoing study tx) in arm 8. In arm 7 (median follow-up 35.0 months), cORR was 79.0% (95% CI 66.8–88.3). Median DoR was 17.6 months (95% CI 10.5–27.3). Median PFS was 14.0 months (11.0–21.1). In arm 8 (median follow-up of 10.7 months), cORR was 81.8% (95% CI 64.5–93.0). Median DoR and median PFS could not be accurately determined due to the short follow up period. Safety data are summarised in the Table. Adjudicated drug-related interstitial lung disease/pneumonitis occurred in 3 (5%) pts in arm 7 (grade 2: n=2; grade 1: n=1) and 1 (3%) pt in arm 8 (grade 2).Table: 555MO

| | Dato-DXd + D Arm 7 (N=62) Arm 8 (N=33) | |
|-----------------|---|----------|
| | | |
| Safety, n (%) | | |
| Any AEs | 62 (100) | 33 (100) |
| Grade ¾ | 37 (60) | 12 (36) |
| Most common AEs | | |
| Stomatitis | 43 (69) | 27 (82) |
| Grade 3/4 | 10 (16.1) | 0 |
| Nausea | 42 (68) | 18 (55) |

| | Dato-DXd + D | |
|---------------------------------------|---------------------------|----------|
| | Arm 7 (N=62) Arm 8 (N=33) | |
| Grade 3/4 | 0 | 0 |
| TRAEs | 62 (100) | 33 (100) |
| Grade 3/4 | 30 (48) | 8 (24) |
| Serious AEs | 18 (29) | 5 (15) |
| AEs leading to: | | |
| Discontinuation of any study treatmen | t 12 (19) | 3 (9) |
| Death | 1 (2)* | 0 |
| Immune-mediated AEs [†] | 20 (32) | 11 (33) |
| Grade 3/4 | 1 (1.6) | 0 |

AEs, adverse events; TRAEs, treatment-related AE.* Not related to study tx. Most common were hypothyroid events (Arm 7: 23%; Arm 8: 24%).

Conclusions

In 1L a/mTNBC, the combination of Dato-DXd + D continued to demonstrate robust antitumour activity across both arms. The safety profile was manageable with no new safety signals.

Clinical trial identification

NCT03742102; release date 15 November 2018.

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Legal entity responsible for the study

AstraZeneca.

Funding

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Disclosure

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