

LBA102
Efficacy and safety of ponsegromab in patients with cancer-associated cachexia: Results from the open-label extension of a randomized, placebo-controlled, phase II study

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Background

Ponsegromab, a first-in-class monoclonal antibody that inhibits growth differentiation factor 15 (GDF-15), improved body weight, symptoms, physical activity, and muscle mass in patients with cancer cachexia in a 12-week, double blind phase 2 trial (Part A; NCT05546476). We report the findings of the 1-year, open-label extension (Part B).

Methods

Participants with cancer cachexia and elevated serum GDF-15 (≥1500 pg/mL) received subcutaneous (SC) ponsegromab (100, 200, or 400 mg) or matching placebo every 4 weeks (Q4W) during Part A. At 12 weeks, participants could pursue open-label treatment with ponsegromab 400 mg Q4W SC through week 64 (Part B). Change in body weight and safety were assessed through weeks 64 and 72, respectively.

Results

Of 137 participants who completed Part A, 117 (85.4%) participants (44.4% non-small cell lung, 29.1% colorectal, and 26.5% pancreatic cancer; 70.9% stage 4) opted into Part B. Median (IQR) age and weight at baseline were 68 (61,74) years and 54.7 (46.0, 63.8) kg, respectively. Overall, progressive weight gains were observed with mean (SD) increases of 2.74 (4.89) kg, 4.43 (5.95) kg, and 5.18 (5.93) kg at weeks 24, 52, and 64, respectively. Weight gains were lowest in participants assigned to placebo in Part A (Table). All-causality and treatment-related adverse events were reported in 84.2% and 4.4% of participants from weeks 12-72, respectively. Of the 23 deaths during Part B, 19 (82.6%) were reported as due to malignancy and none were treatment-related. Table: LBA102

	Baseline		Wk 12		Wk 24		Wk 52		Wk 64	
	N	Mean (SD) weight, kg	N	Mean (SD) CFB, kg	N	Mean (SD) CFB, kg	N	Mean (SD) CFB, kg	N	Mean (SD) CFB, kg
All Part B Participants	117	56.2 (12.3)	114	+1.26 (3.68)	81	+2.74 (4.89)	43	+4.43 (5.95)	37	+5.18 (5.93)
<i>PART A → PART B TREATMENT</i>										
Placebo → Pons 400 mg	26	53.4 (10.7)	24	-0.30 (2.03)	18	+0.89 (2.49)	6	+1.63 (3.90)	6	+2.28 (3.41)
Pons 100 mg → Pons 400 mg	27	52.8 (12.8)	27	+0.84 (3.18)	21	+1.68 (4.51)	11	+4.86 (4.58)	9	+5.57 (4.48)
Pons 200 mg → Pons 400 mg	35	58.5 (13.8)	34	+1.36 (3.70)	23	+4.01 (4.70)	14	+4.67 (7.43)	11	+4.01 (6.78)
Pons 400 mg → Pons 400 mg	29	58.9 (10.4)	29	+2.83 (4.57)	19	+4.11 (6.47)	12	+5.15 (6.22)	11	+7.61 (6.72)

Abbreviations: CFB- change from baseline; Pons- ponsegromab.

Conclusions

Improvements in body weight during 12-week Part A were maintained with ponsegromab through 64 weeks in Part B. Participants assigned to placebo in Part A showed stabilization of weight during Part B, but weight gain was less than for participants who received ponsegromab during Part A. Ponsegromab continued to be safe and well-tolerated through 72 weeks with no new safety signals.

Clinical trial identification

NCT05546476.

Legal entity responsible for the study

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Funding

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Disclosure

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