

### FIRST-IN-HUMAN STUDY OF SGN-B7H4V, A B7-H4 DIRECTED VEDOTIN ADC, IN PATIENTS WITH ADVANCED SOLID TUMORS: PRELIMINARY RESULTS OF A PHASE 1 STUDY (SGNB7H4V-001)

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## **Background and Study Design**

- B7-H4 is an immune checkpoint ligand expressed at low levels in normal tissue and upregulated in solid tumors, including breast, ovarian, and endometrial cancers which show high expression of B7-H4<sup>1-4</sup>
- SGN-B7H4V is an investigational vedotin ADC comprising a B7-H4-directed monoclonal antibody conjugated to MMAE via a protease-cleavable linker<sup>1,5</sup>
- SGN-B7H4V demonstrated antitumor activity in preclinical models<sup>1,6,7</sup>

### **Study Design**

 SGNB7H4V-001 (EudraCT 2021-002107-35; NCT05194072) is a multicenter study evaluating the safety, tolerability, PK, and antitumor activity of SGN-B7H4V in patients with advanced solid tumors<sup>8</sup>



2Q3W, day 1 and day 8 on a 21-day cycle; 2Q4W, day 1 and day 15 on a 28-day cycle; ADC, antibody-drug conjugate; D, day; MMAE, monomethyl auristatin E; MTD, maximum tolerated dose; PK, pharmacokinetics. 1. Gray E, et al. J Immunother Cancer. 2021;9(suppl 2):A895. 2. Liang L, et al. Hum Pathol. 2016;57:1-6. 3. Leong SR, et al. Mol Pharm. 2015;12(6):1717-29. 4. Bregar A, et al. Gynecol Oncol. 2017;145(3):446-52. 5. Klussman K, et al. J Immunother Cancer. 2020;8(suppl 3):A372. 6. Gray E, et al. Cancer Res. 2022;82(suppl 12):1281. 7. Ulrich M, et al. J Immunother Cancer. 2022;10(suppl 2):1234. 8. Patnaik A, et al. J Clin Oncol. 2022;40(suppl 16):TPS3155.



## Patient Demographics and Disease Characteristics at Baseline

Part A Dose Escalation	2Q3W 0.75, 1.0, 1.25, 1.5 mg/kg (N = 41)	2Q4W 1.25, 1.5, 1.75, 2.0 mg/kg (N = 45)
Age, median years (range)	63.0 (33 - 86)	62.0 (35 - 78)
Sex, n (%)		
Male	5 (12)	5 (11)
Female	36 (88)	40 (89)
ECOG performance status, n (%)		
0	11 (27)	13 (29)
1	30 (73)	32 (71)
Number of prior systemic LA/m therapies, <sup>a</sup> median (range)	3.0 (1 - 8)	3.0 (1 - 17)
Disease diagnosis, n (%)		
Ovarian cancer <sup>b</sup>	13 (31.7)	8 (17.8)
HR-positive, HER2-negative breast cancer	10 (24.4)	8 (17.8)
Triple negative breast cancer	6 (14.6)	6 (13.3)
Endometrial carcinoma	5 (12.2)	11 (24.4)
Cholangiocarcinoma	3 (7.3)	6 (13.3)
Non-small cell lung cancer	3 (7.3)	3 (6.7)
Gallbladder carcinoma	1 (2.4)	1 (2.2)
Adenoid cystic carcinoma of the head and neck	0 (0)	2 (4.4)

2Q3W, day 1 and day 8 on a 21-day cycle; 2Q4W, day 1 and day 15 on a 28-day cycle; HER2, human epidermal growth receptor 2; HR, hormone receptor; LA/m, locally advanced or metastatic. <sup>a</sup> Count of unique prior systemic therapies in the LA/m disease setting, excluding maintenance prior therapies

<sup>b</sup> High-grade serous epithelial ovarian cancer, primary peritoneal cancer, or fallopian tube cancer

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## Safety Profile

• SGN-B7H4V showed a manageable safety profile across doses evaluated in Part A

2Q3W 2Q4W 0.75, 1.0, 1.25, or 1.5 1.25, 1.5, 1.75, or 2.0 Part A Dose Escalation mg/kg mg/kg (N = 41)**TEAEs**, n (%) (N = 45)Any grade 37 (90.2) 41 (91.1) **Treatment-related TEAEs** 32 (78.0) 31 (68.9) Grade ≥3 TEAEs 19 (46.3) 18 (40.0) SAEs 11 (26.8) 10 (22.2) **Treatment-related SAEs** 4 (9.8) 1 (2.2) **TEAEs** leading to drug 2 (4.4)<sup>a</sup> 0 discontinuation **TEAEs** leading to dose reduction 7 (17.1) 6 (13.3) **Treatment-related deaths** 0 0

<sup>a</sup> TEAEs leading to drug discontinuation were grade 4 diarrhea and unrelated grade 5 respiratory failure.

2Q3W, day 1 and day 8 on a 21-day cycle; 2Q4W, day 1 and day 15 on a 28-day cycle; DLT, dose-limiting toxicity; pt, patient; SAE, serious adverse event; TEAE, treatment-emergent adverse event.

<b>2Q3W</b> <sup>a</sup>					
Dose Level	No. Pts Treated	No. Pts with DLTs			
0.75 mg/kg	3	0			
1.0 mg/kg	6	0			
1.25 mg/kg	15	1			
1.5 mg/kg	16	3			

2Q4W <sup>b</sup>				
Dose Level	No. Pts Treated	No. Pts with DLTs		
1.25 mg/kg	6	1		
1.5 mg/kg	20	1		
1.75 mg/kg	14	0		
2.0 mg/kg	3	1		

<sup>a</sup> DLTs occurring in 2Q3W: hyperglycemia (grade 3, 1.25 mg/kg); febrile neutropenia (grade 3, 1.5 mg/kg), neutropenia (grade 3, 1.5 mg/kg); and vomiting (grade 2, 1.5 mg/kg).

<sup>b</sup> DLTs occurring in 2Q4W: acute kidney injury (grade 3), diarrhea (grade 4), and hypotension (grade 4) in a single pt (1.25 mg/kg); peripheral sensory neuropathy (grade 2, 1.5 mg/kg); and transaminitis (grade 3, 2.0 mg/kg).

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## **Treatment-Emergent Adverse Events**

<b>Part A Dose Escalation</b> Most common TEAEs, n (%)	2Q3W (N = 41)		2Q4W (N = 45)	
<ul> <li>&gt;20% Any grade; OR</li> <li>&gt;2.5% grade ≥3</li> </ul>	Any grade	Grade ≥3	Any grade	Grade ≥3
Fatigue	11 (26.8)	2 (4.9)	15 (33.3)	1 (2.2)
Peripheral sensory neuropathy	10 (24.4)	0 (0)	11 (24.4)	0 (0)
Diarrhea	9 (22.0)	1 (2.4)	5 (11.1)	1 (2.2)
Neutropenia	7 (17.1)	5 (12.2)	1 (2.2)	1 (2.2)
Pleural effusion	4 (9.8)	2 (4.9)	1 (2.2)	1 (2.2)
Anemia	4 (9.8)	1 (2.4)	6 (13.3)	2 (4.4)
Nausea	3 (7.3)	0 (0)	9 (20.0)	0 (0)
Leukopenia	2 (4.9)	2 (4.9)	0 (0)	0 (0)
Pneumonia	1 (2.4)	0 (0)	2 (4.4)	2 (4.4)
Sepsis	1 (2.4)	1 (2.4)	2 (4.4)	2 (4.4)
Hypotension	0 (0)	0 (0)	2 (4.4)	2 (4.4)
Нурохіа	0 (0)	0 (0)	2 (4.4)	2 (4.4)
Pulmonary embolism	0 (0)	0 (0)	2 (4.4)	2 (4.4)

### Additional Safety Findings in Part C

- **170 patients treated** in Parts A, B, and C of the ongoing phase 1 study
- After the data cut-off, 2 treatment-related deaths occurred at the 1.5 mg/kg 2Q3W dose in Part C Dose Expansion:
  - Grade 5 hyperglycemia and grade 4 neutropenia in Cycle 1 in a patient with gallbladder carcinoma, type 2 diabetes mellitus, and severe obesity
  - Grade 5 febrile neutropenia in Cycle 1 in a patient with adenoid cystic carcinoma
- Due to the cases of severe neutropenia on the 2Q3W schedule, all patients have been transitioned to 2Q4W dosing



2Q3W, day 1 and day 8 on a 21-day cycle; 2Q4W, day 1 and day 15 on a 28-day cycle; BMI, body mass index; PK, pharmacokinetics; TEAE, treatment-emergent adverse event.

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## Antitumor Activity in Part A

Confirmed and durable responses were observed in patients with breast (7/28 patients), ovarian • (4/20 patients), endometrial (1 [CR]/16 patients), lung (1/6 patients), and biliary tract cancers (2/11 patients) across dose levels.



## Authors' Conclusions

SGN-B7H4V is an investigational vedotin ADC directed to the immune checkpoint ligand B7-H4<sup>1</sup>

- In dose escalation, commonly observed AEs include peripheral neuropathy, neutropenia, diarrhea, and nausea, consistent with other vedotin ADCs<sup>2</sup>
- Antitumor activity was observed across doses and tumor types (breast, ovarian, endometrial, lung, and biliary tract cancers)
- Patients continue to receive treatment with SGN-B7H4V on a 2Q4W dosing schedule

2Q4W, day 1 and day 15 on a 28-day cycle; ADC, antibody-drug conjugate; AE, adverse event; pt, patient. 1. Gray E, et al. J Immunother Cancer. 2021;9(suppl 2):A895; 2. ADCETRIS. Prescribing Information [package insert]. Bothell, WA: Seagen Inc.; 2023.



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