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Greco-2: A randomized, phase 2 study of stereotactic body radiation therapy (SBRT) in combination with rucosopasem (GC4711) in the treatment of locally advanced or borderline resectable nonmetastatic pancreatic cancer

Todd A. Aguilera

Parag J. Parikh

Maged Ghaly

Sarah E. Hoffe

Joseph M. Herman

See next page for additional authors

Authors

Todd A. Aguilera, Parag J. Parikh, Maged Ghaly, Sarah E. Hoffe, Joseph M. Herman, Joseph M. Caster, Dae Won Kim, James Costello, Mokenge P. Malafa, Muhammad S. Beg, Elizabeth C. Moser, Eugene P. Kennedy, Kara Terry, and Michael Kurman

TPS766 **Trials in Progress Poster Session**

Greco-2: A randomized, phase 2 study of stereotactic body radiation therapy (SBRT) in combination with rucosopasem (GC4711) in the treatment of locally advanced or borderline resectable nonmetastatic pancreatic cancer.

Todd Anthony Aguilera, Parag Parikh, Maged Ghaly, Sarah E. Hoffe, Joseph M. Herman, Joseph Michael Caster, Dae Won Kim, James Costello, Mokenge Peter Malafa, Muhammad S. Beg, Elizabeth Charlotte Moser, Eugene Paul Kennedy, Kara Terry, Michael Kurman; University of Texas Southwestern Medical Center, Dallas, TX; Henry Ford Cancer Institute, Detroit, MI; Northwell Health Cancer Institute, New Hyde Park, NY; H. Lee Moffitt Cancer Center and Research Institute, Tampa, FL; Universty of Iowa Hospitals and Clinics, Iowa City, IA; UT Southwestern Medical Center, Dallas, TX; Galera Therapeutics, Inc., Malvern, PA

Background: While treatment of pancreatic cancer has advanced, survival rates remain low. Stereotactic body radiotherapy (SBRT; high dose per fraction radiation) may exhibit improved clinical outcomes in locally advanced pancreatic cancer but carries potential gastrointestinal toxicity risks. Rucosopasem (GC4711) is one of a class of investigational selective dismutase mimetics that rapidly and specifically converts superoxide to hydrogen peroxide. Studies have shown that normal cells tolerate hydrogen peroxide fluxes better than cancer cells. As radiation response modifiers, dismutase mimetics have the potential to increase tumor control of SBRT without compromising radiation safety. In a pilot phase 1/2 trial in patients with pancreatic cancer, avasopasem, a dismutase mimetic related to rucosopasem, nearly doubled median overall survival in patients receiving SBRT vs placebo plus SBRT. Improvements versus placebo were also observed in local tumor control, time to metastases, and progression-free survival. Altogether, these data support the hypothesis that rucosopasem may improve survival and the benefit-risk ratio of SBRT by improving efficacy without increasing gastrointestinal toxicity. **Methods:** GRECO-2 is a phase 2, multicenter, randomized, double-blind, placebo-controlled study (NCT04698915) to determine the effect of adding rucosopasem to SBRT on overall survival in patients with borderline resectable or locally advanced, unresectable nonmetastatic pancreatic cancer following initial chemotherapy with a FOLFIRINOX-based regimen or a gemcitabine doublet. Approximately 160 patients will be randomized (approximately 35 sites) to receive rucosopasem 100 mg or placebo via IV infusion over 15 minutes, prior to each SBRT fraction (5 x 10 Gy). Patients judged to be resectable will undergo surgical exploration within 8 weeks after SBRT. The primary endpoint is overall survival. Secondary endpoints include progression-free survival, locoregional control, time to metastasis, surgical resection rate, RO resection rate, best overall response, in-field local response, and safety (acute and late toxicities). Exploratory endpoints include PRO-CTCAE and CA19-9 normalization. This trial (NCT04698915) is now enrolling. Clinical trial information: NCT04698915. Research Sponsor: Galera Therapeutics, Inc.