# Medical Therapies for HCC : What's New?

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# Disclosures

No relevant financial interests with any commercial interest to disclose.

*Brand names are included in this presentation for participant clarification purposes only.*

*No product promotion should be inferred.*

# Modern Era of Therapy

- Sorafenib (Child-Pugh Class A [category 1] or B7) **– *Nov 2007***
- Regorafenib (Child-Pugh Class A only) (category 1) **– *April 2017***
- Nivolumab (Child-Pugh Class A or B) **– *Sep 2017***
- Lenvatinib (Child-Pugh Class A only) **– *Aug 2018***
- Pembrolizumab (Child-Pugh Class A only) (category 2B) – ***Nov 2018***
- Cabozantinib (Child-Pugh Class A only) (category 1) **– Jan 2019**
- Ramucirumab (AFP ≥400 ng/mL only) (category 1) **– *May 2019***
- Nivolumab + ipilimumab (Child-Pugh Class A only) **– *March 2020***
- Atezolizumab + bevacizumab (Child-Pugh Class A only) category 1 **– *May 2020***

# CheckMate 040

| Outcome | Nivolumab and ipilimumab (cohort 4; n= 49)[a] | Nivolumab (cohorts 1 and 2; n= 154)[b] |
|---|---|---|
| Confirmed overall response rate (95% CI) | 33.0% (20%-48%) | 14% (9%-21%) |
| Complete response | 8% | 2% |
| Partial response | 24% | 12% |
| Duration of response, range in months | 4.6-30.5+ | 3.2-51.1+ |

[a]Results are based on a minimum follow-up of 28 months.

[b]Results are based on a minimum follow-up of approximately 27 months. Patients received nivolumab at 3 mg/kg every 2 weeks until disease progression or unacceptable toxicity.

- The FDA granted an accelerated approval to the combination of nivolumab (Opdivo) and ipilimumab (Yervoy) for the treatment of patients with advanced hepatocellular carcinoma (HCC) previously treated with sorafenib (Nexavar).
- The longest duration of OS in the second-line setting for advanced-stage HCC, tested in clinical trials

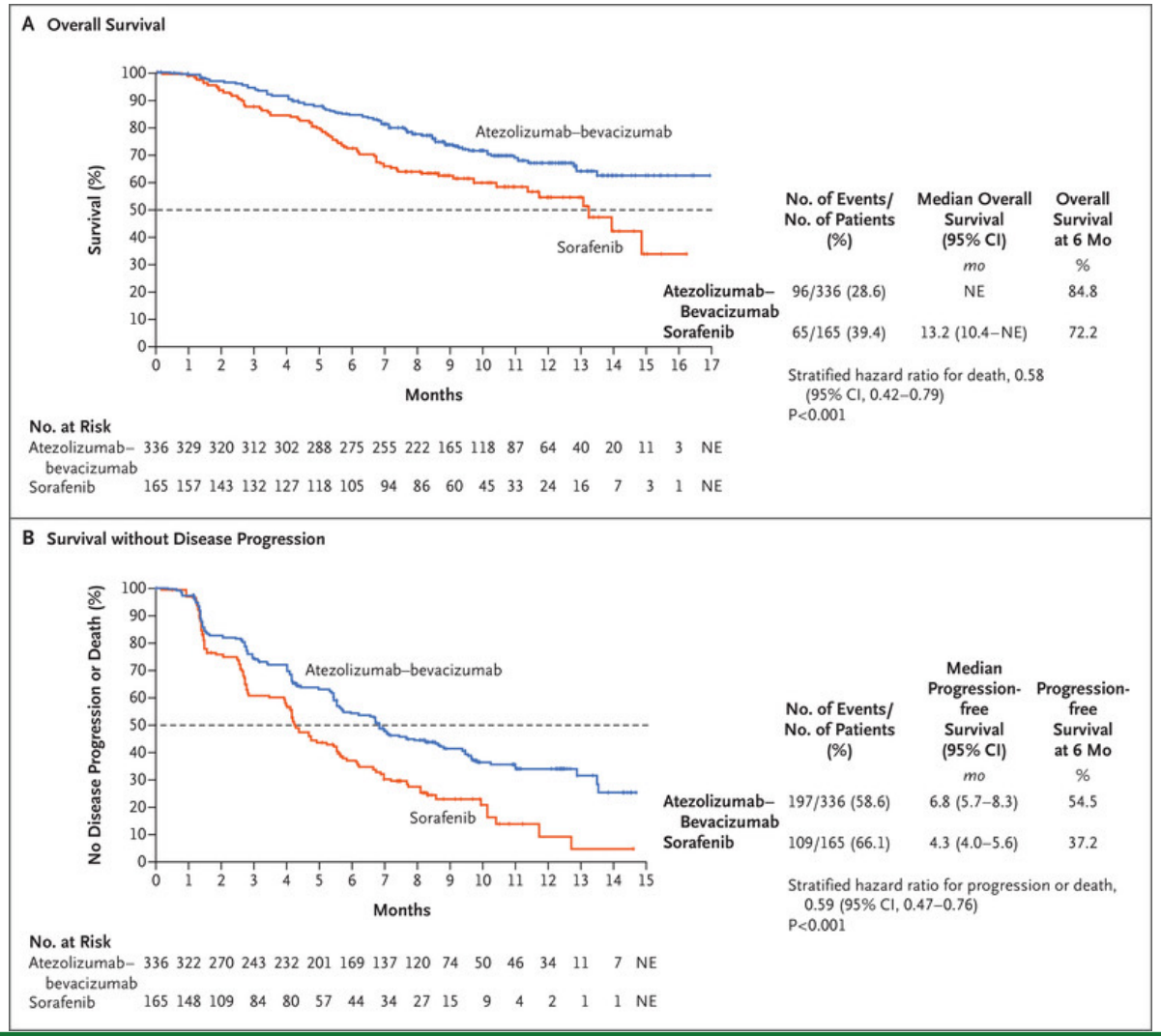
# IMbrave 150

- Atezolizumab (Tecentriq) in combination with bevacizumab (Avastin) as treatment for patients with unresectable or metastatic hepatocellular carcinoma (HCC) who have not had a prior systemic therapy
- IMbrave150 was the first study to demonstrate an improved overall survival (OS) and progression-free survival (PFS) with immunotherapy in patients with unresectable or metastatic HCC
- Updated findings resulted in significant and meaningful improvement in both OS and PFS with the combination versus sorafenib in this patient population. Complete responses (CRs) were achieved regardless of poor prognostic factors or etiology
- ORR was 27% with the combination versus 12% with sorafenib
- TTR was 2.8 months with the combination versus 3.3 months with sorafenib

# IMbrave 150

ORR 27%

TTR 2.8 months



# KEYNOTE-524/Study 116

- Single-arm phase 1b KEYNOTE-524/Study 116 trial (NCT03006926). Treatment naïve
- Findings from the study supported an **FDA breakthrough therapy designation granted to the combination in July 2019**
- The pembrolizumab/lenvatinib did not show evidence of meaningful improvement over available therapies (July 2020), which now included the atezolizumab/bevacizumab combination
- Phase 3 LEAP-002 trial is continuing to explore the safety and efficacy of the pembrolizumab and Lenvatinib combination in comparison with Lenvatinib alone as frontline treatment for adult patients with advanced HCC (NCT03713593). The trial is ongoing but no longer enrolling patients.

# Thank You!