

SAFETY AND EFFICACY OF A NOVEL ANTI-CD20/CD19 BI-SPECIFIC CAR T-CELL THERAPY (C-CAR039) IN RELAPSED OR REFRACTORY (R/R) B-CELL NON-HODGKIN LYMPHOMA (B-NHL)

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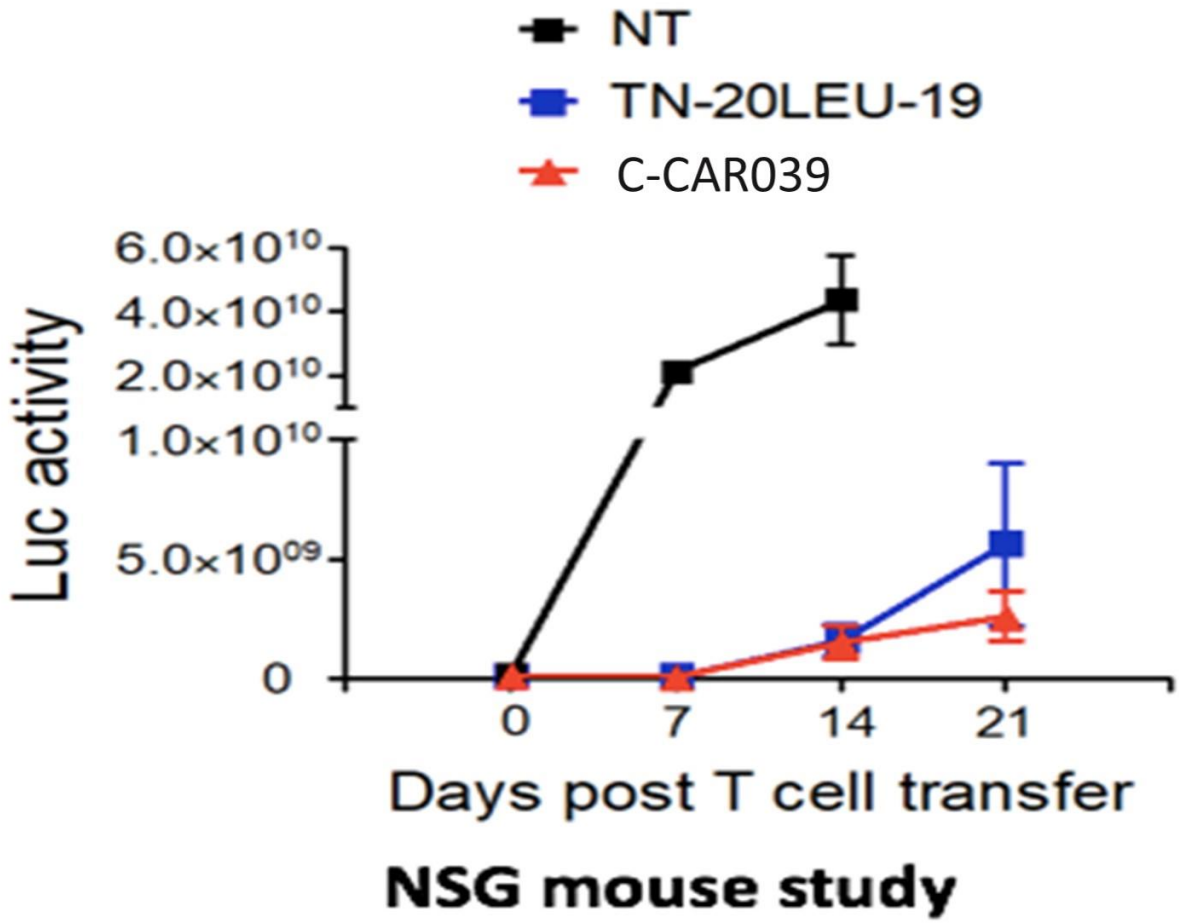
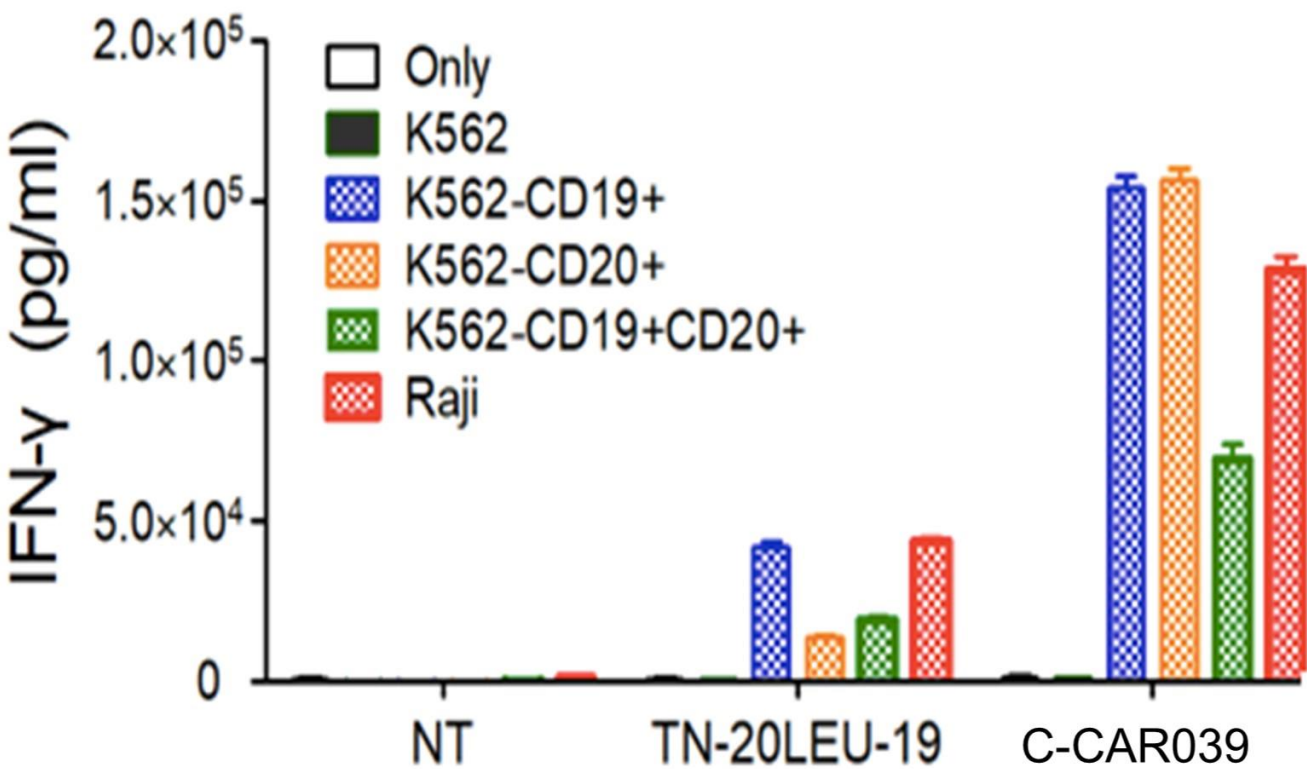
June, 7 2021

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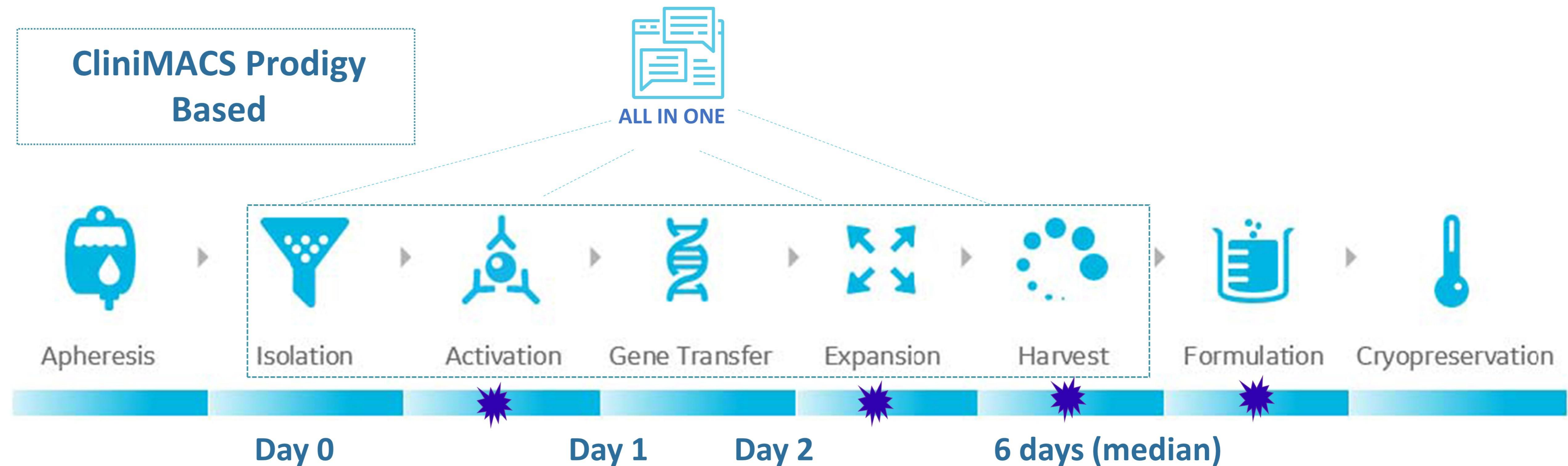


C-CAR039 Shows Superior Anti-tumor Activity vs. anti-CD20/CD19 Bi-specific CAR-T with Leu16-FMC63 *in vitro* and *in vivo*



- C-CAR039 is a novel 2nd generation 4-1BB bi-specific chimeric antigen receptor T (CAR-T) targeting both CD19 and CD20 antigens
- C-CAR039 shows *in vitro* anti-tumor activity against both single positive and double-positive CD20/CD19 expressing tumors
- C-CAR039 shows superior anti-tumor activity both *in vitro* and *in vivo* to the CD20/CD19 bispecific CAR-T with the tandem linked scFvs of Leu16 and FMC63

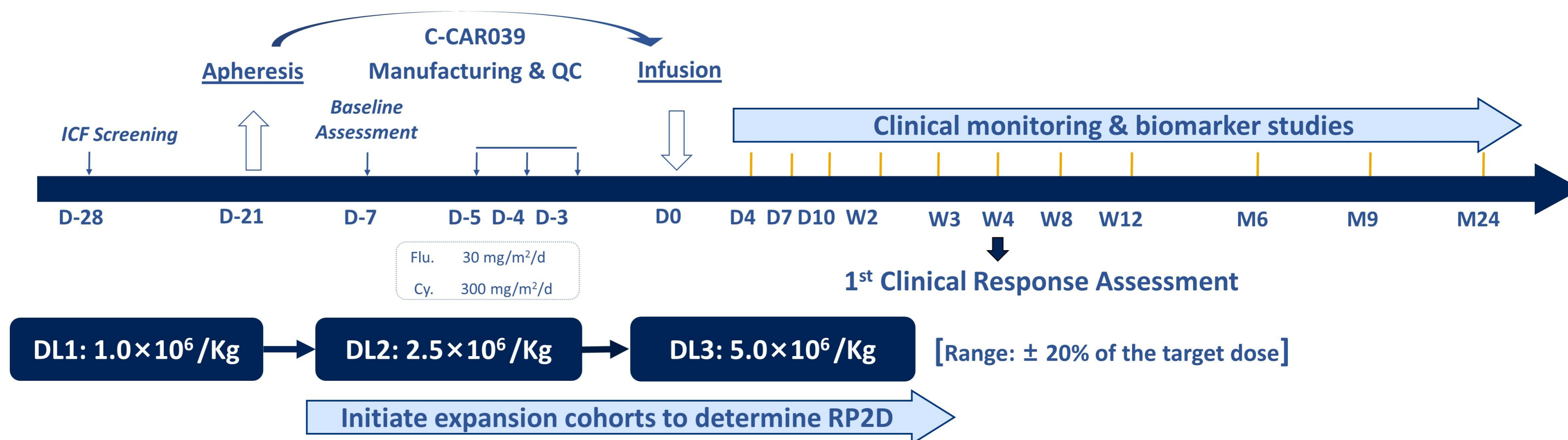
C-CAR039 Manufacture Process



- Serum-free
- Functionally Closed, Highly Automated System
- ✦ Improved Process

Study Design

- A phase 1, open-label, dose escalation and expansion study conducted at four sites in China



- Key Eligibility Criteria:**

- 18-75 years of age
- r/r B-NHL including DLBCL, FL, MCL
- Either CD19 or CD20 positive disease
- No active CNS involvement
- Received anti-CD20 monoclonal antibodies

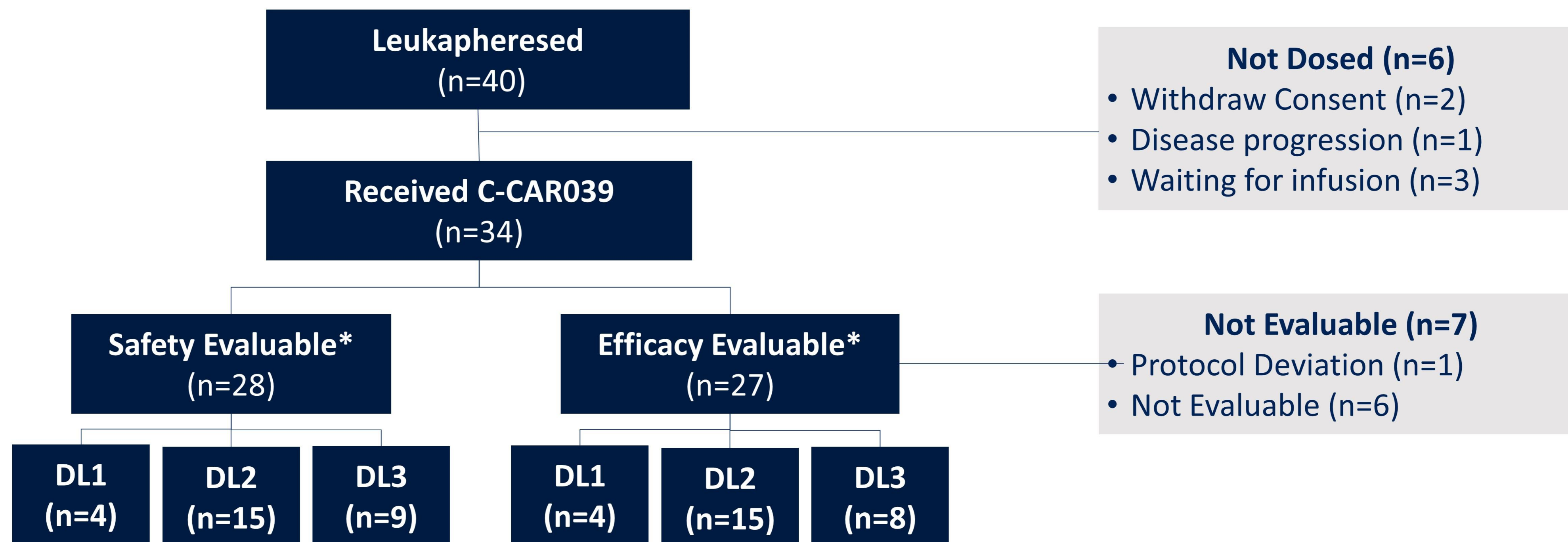
- Safety Assessment:**

- Incidence and severity of treatment-emergent adverse events (CTCAE V5.0 and ASTCT)

- Efficacy Assessment:**

- ORR (CR+PR); DOR; PFS; OS (Lugano 2014)

Patient Disposition



- As of April 20, 2021, 40 patients had been leukapheresed in four clinical centers, 34 patients were infused
- The median manufacturing time was 6 days (range, 5 to 11 days)
- The median vein to vein time was 19 days (range, 12 to 67 days)
- 28 patients have at least 1 month data. Only 27 patients were evaluable for efficacy since 1 patient does not have measurable disease at baseline

*Includes all treated patients who have ≥ 1 month of follow up

Demographic and Baseline Characteristics

Characteristics	N=28
Median age, yrs (range)	55.5 (28-71)
• Age ≥ 65, n (%)	8 (28.6)
Male, n (%)	19 (67.9)
NHL Subtype, n (%)	
• DLBCL,NOS	25 (89.3)
• PMBCL	1 (3.6)
• tFL	1 (3.6)
• FL	1 (3.6)
ECOG PS, n (%)	
• 0	18 (64.3)
• 1	10 (35.7)
IPI score 3/4, n (%)	7 (25.0)
Ann Arbor stage III / IV, n (%)	21 (75.0)

Characteristics	N=28
Double-expressor lymphoma, n (%)	8 (28.6)
Median number of prior lines of therapy, n (range)	3 (1-5)
• 1, n (%)	1 (3.6)
• 2, n (%)	10 (35.7)
• 3, n (%)	4 (14.3)
• 4, n (%)	7 (25.0)
• 5, n (%)	6 (21.4)
Prior ASCT, n (%)	5 (17.9)
Prior BTK inhibitor, n (%)	8 (28.6)
Prior Lenalidomide, n (%)	9 (32.1)
Never Achieved CR to prior therapies, n (%)	8 (28.6)
Received bridging therapy, n (%)	5 (17.9)

Most Common Adverse Events

AE*, n (%)	All Grades (n=28)	Grade ≥3 (n=28)
Hematologic		
Leukopenia	28 (100)	25 (89.3)
Neutropenia	28 (100)	25 (89.3)
Anemia	28 (100)	9 (32.1)
Lymphopenia	27 (96.4)	27 (96.4)
Thrombocytopenia	18 (64.3)	7 (25.0)
CRS	26 (92.9)	1 (3.6)
Infection	15 (53.6)	1 (3.6)
Gastrointestinal		
Constipation	13 (46.4)	0 (0)
Other		
Hypertriglyceridemia	21 (75.0)	1 (3.6)
Hypoalbuminemia	18 (64.3)	0 (0)
Hypogammaglobulinemia	15 (53.6)	0 (0)
Lactate dehydrogenase increased	15 (53.6)	0 (0)
Hypokalemia	14 (50.0)	1 (3.6)
Alanine aminotransferase increased	13 (46.4)	2 (7.1)
Hyperuricemia	10 (35.7)	0 (0)
Hyperglycemia	10 (35.7)	0 (0)
Aspartate aminotransferase increased	10 (35.7)	2 (7.1)

*Events reported in 35% or more patients; CRS, Cytokine Release Syndrome

- 100% of patients experienced at least 1 AE of any grade
- Cytopenias were common, mostly related to Cy/Flu lymphodepletion and are reversible
- 92.9% of patients experienced CRS. Most were grade 1 or 2. Only 1 patient experienced grade 3 CRS. All CRS are reversible
- Infections were common (53.6%). Only 1 patient experienced grade 3 infection

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Cytokine Release Syndrome

CRS	All (N=28)	1.0X10 ⁶ /kg (N=4)	2.5x10 ⁶ /kg (N=15)	5.0x10 ⁶ /kg (N=9)
CRS*, n(%)				
Any grade	26 (92.9)	4 (100)	14 (93.3)	8 (88.9)
Grade ≥ 3	1 (3.6)	0 (0)	1 (6.7)	0 (0)
Most common symptoms of any grade, n/n (%)				
Pyrexia	26/26 (100)	4/4 (100)	14/14 (100)	8/8 (100)
Hypotension	6/26 (23.1)	1/4 (25.0)	4/14 (28.6)	1/8 (12.5)
Hypoxemia	0 (0)	0 (0)	0 (0)	0 (0)
CRS Management, n(%)				
Tocilizumab alone	4 (14.3)	0 (0)	2 (13.3)	2 (22.2)
Corticosteroids alone	1 (3.6)	0 (0)	1 (6.7)	0 (0)
Tocilizumab and Corticosteroids	1 (3.6)	0 (0)	1 (6.7)	0 (0)
Median days to onset, d (range)	2.5 (0-10)	7 (2-10)	3.5 (1-10)	1 (0-9)
Median days to resolution, d (range)	4 (1-25)	2.5 (1-7)	4.5 (1-25)	4 (1-7)

- Only 1 grade 3 CRS. CRS in higher dose groups showed shorter time to onset and longer resolution time.

*CRS, Cytokine Release Syndrome, graded by ASTCT; AE, Adverse Events

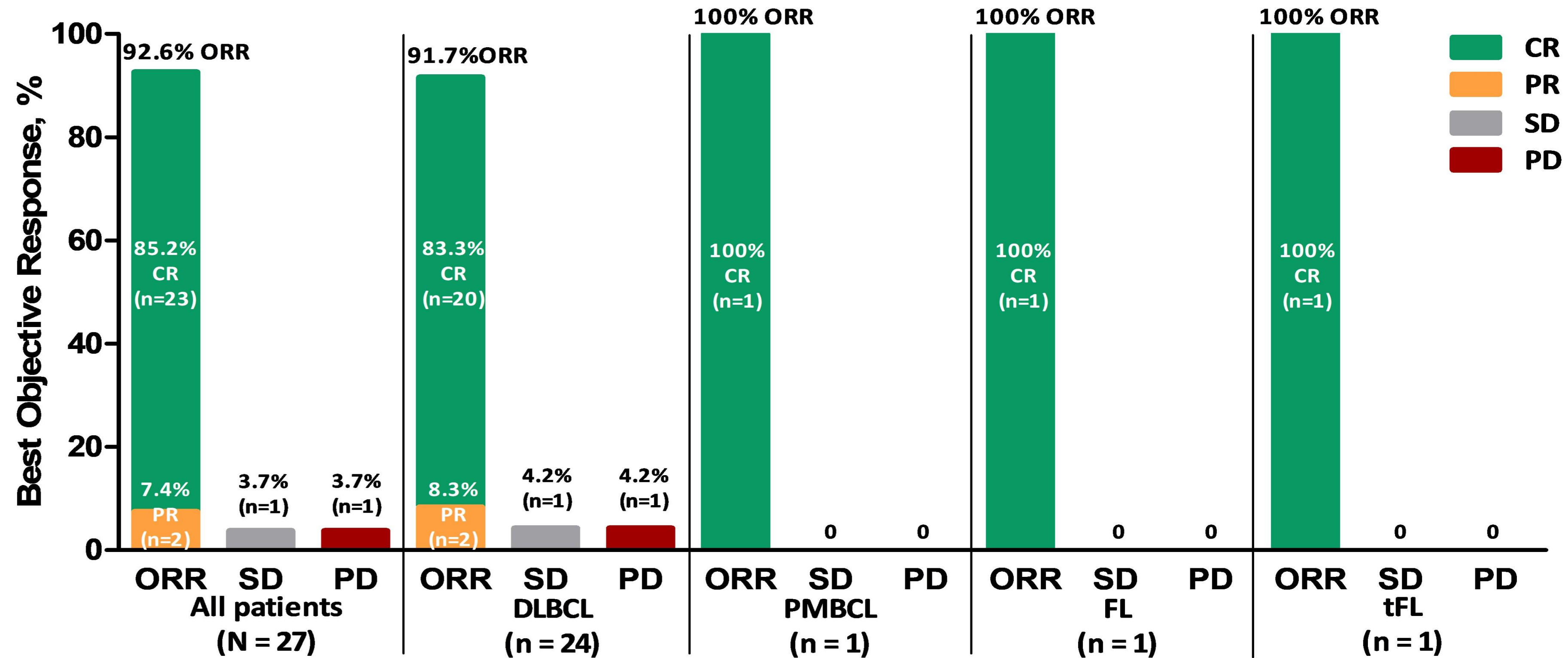
Neurologic Events

ICANS	All (N=28)	1.0X10 ⁶ /kg (N=4)	2.5x10 ⁶ /kg (N=15)	5.0x10 ⁶ /kg (N=9)
Neurologic events*, n(%)				
Any grade	2 (7.1)	0 (0)	0 (0)	2 (22.2)
Grade ≥ 3	0 (0)	0 (0)	0 (0)	0 (0)
Most common symptoms of any grade, n/n(%)				
Tremor	2/2 (100)	0 (0)	0 (0)	2/2 (100)
Confusion	0 (0)	0 (0)	0 (0)	0 (0)
ICANS management, n(%)				
Corticosteroids	1 (3.6)	NA	NA	1 (11.1)
Tocilizumab	0 (0)	NA	NA	0 (0)
Median days to onset, d (range)	16 (4-28)	NA	NA	16 (4-28)
Median days to resolution, d (range)	31.5 (11-52)	NA	NA	31.5 (11-52)

- Only 2 patients had grade 1 ICANS, all in 5.0x10⁶ CAR-T cell/kg dosing group

ICANS, Immune Effector Cell-Associated Neurotoxicity Syndrome, graded by ASTCT; AE, Adverse Events; NA, not applicable

Best Overall Response



- 92.6% ORR and CR rate was 85.2% in all patients
- 91.7% ORR and CR rate was 83.3% in DLBCL patients
- The median time to first response was 1 month (range, 0.9-1.6)
- The median time to CR was 1 month (range, 0.9-6.0)

Response was assessed by investigators

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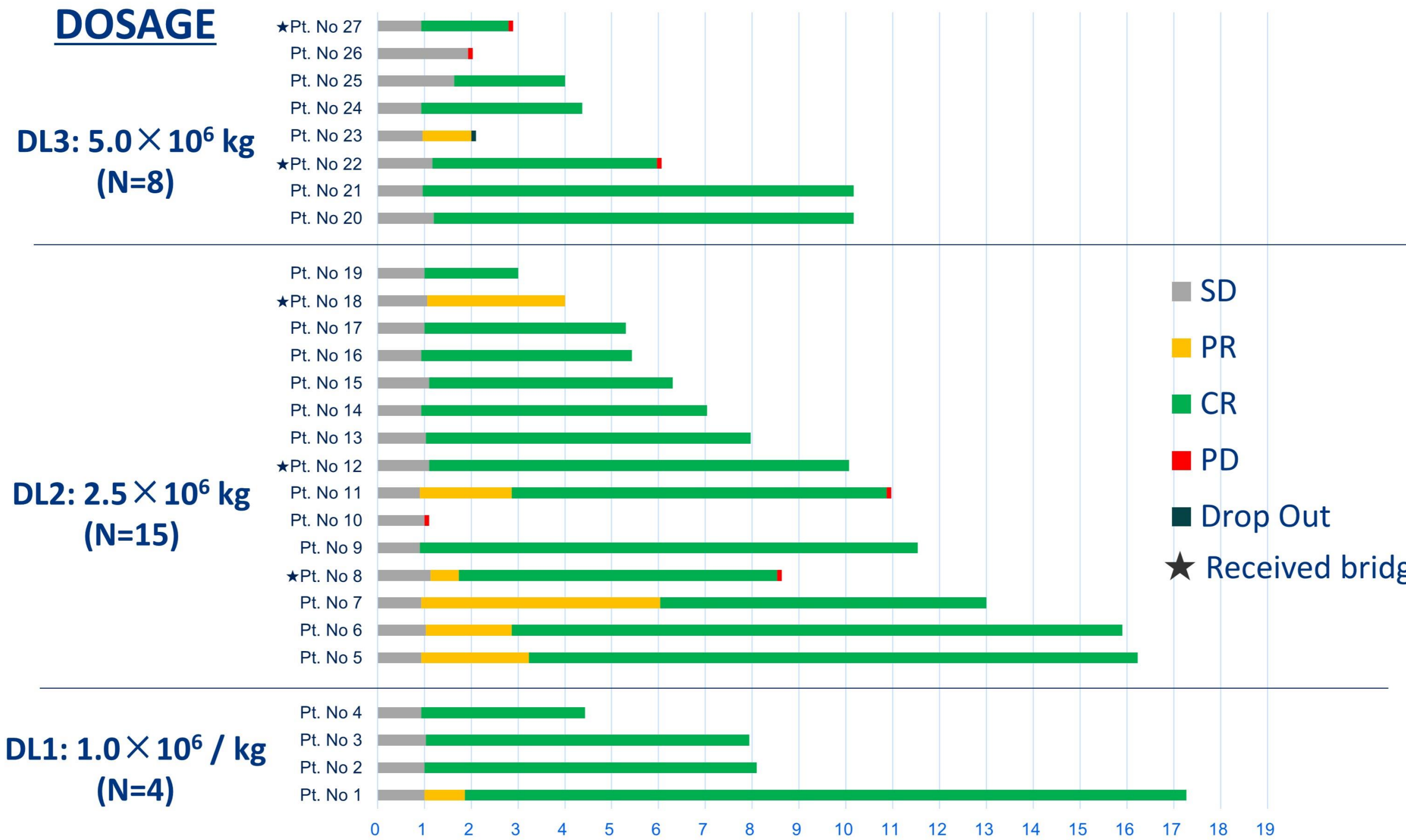
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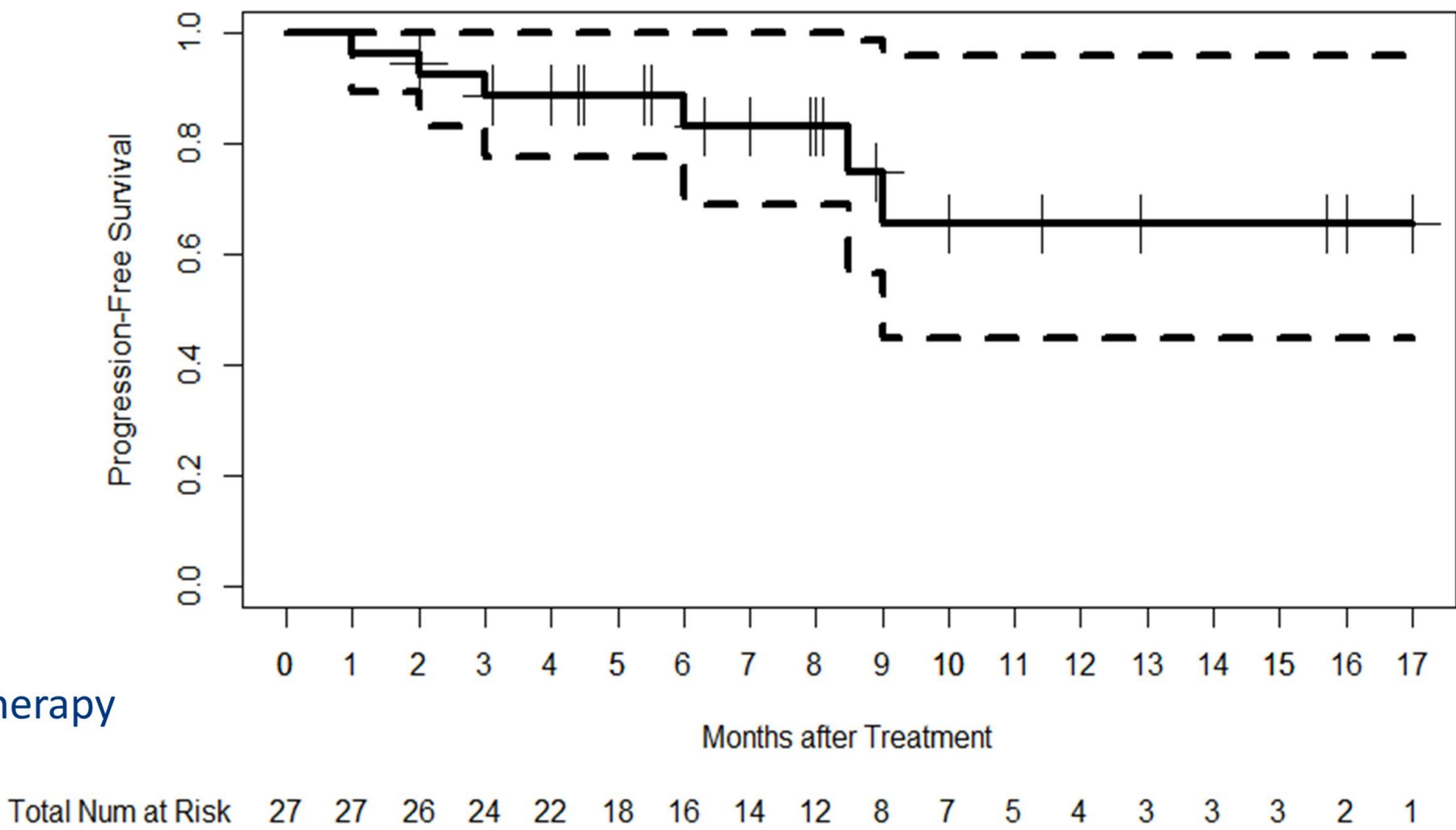
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Duration of Response and Progression-Free Survival

Responses over time

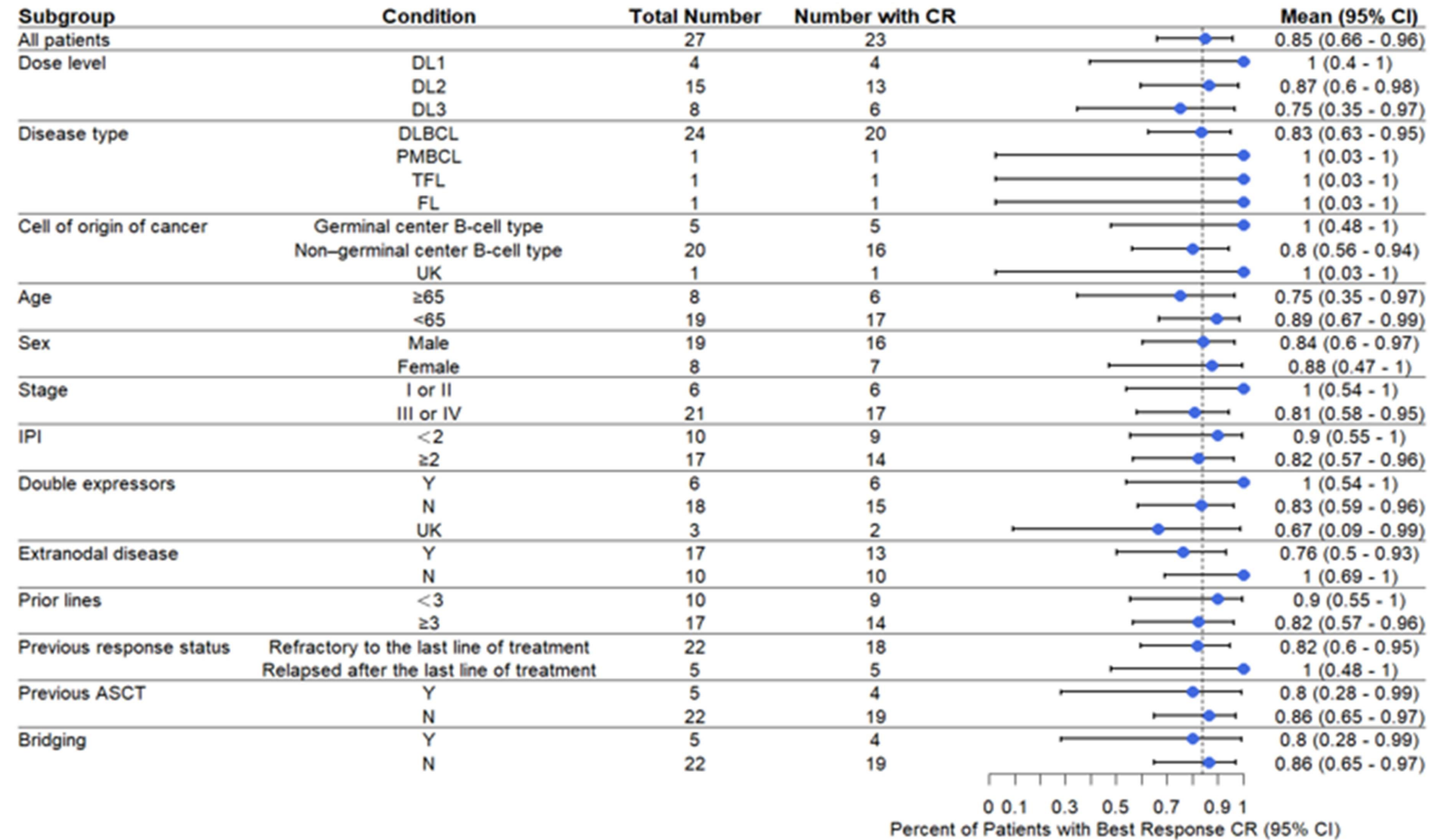


Kaplan Meyer estimation of PFS



- Pt. No 10 had no significant CAR expansion and no clinical response
- Pt. No 23 experienced second malignancy and dropped out
- 4 patients relapsed at 3, 6, 8 and 9 months respectively after achieving CR
- Median follow-up was 7 months (range,1.9-17.2)
- Six-month PFS rate: 83.2% (95% CI, 69.1 to100.0)
- Median DOR has not been reached

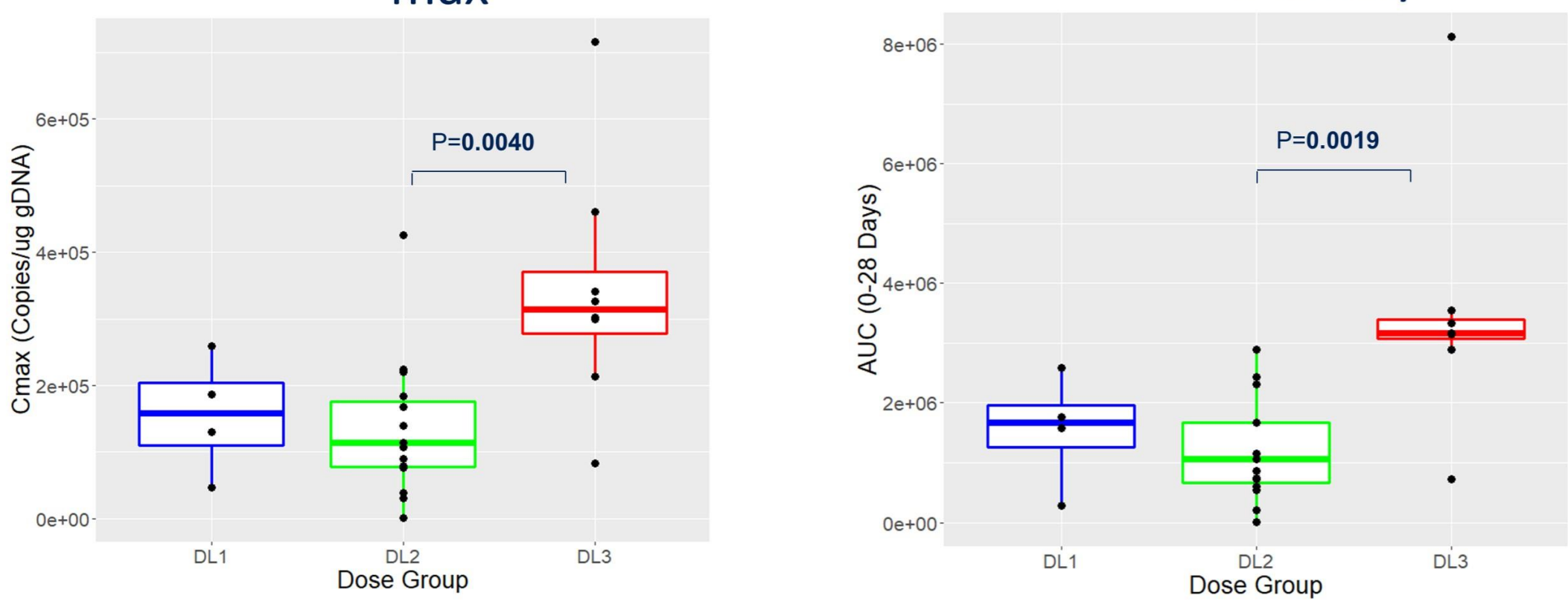
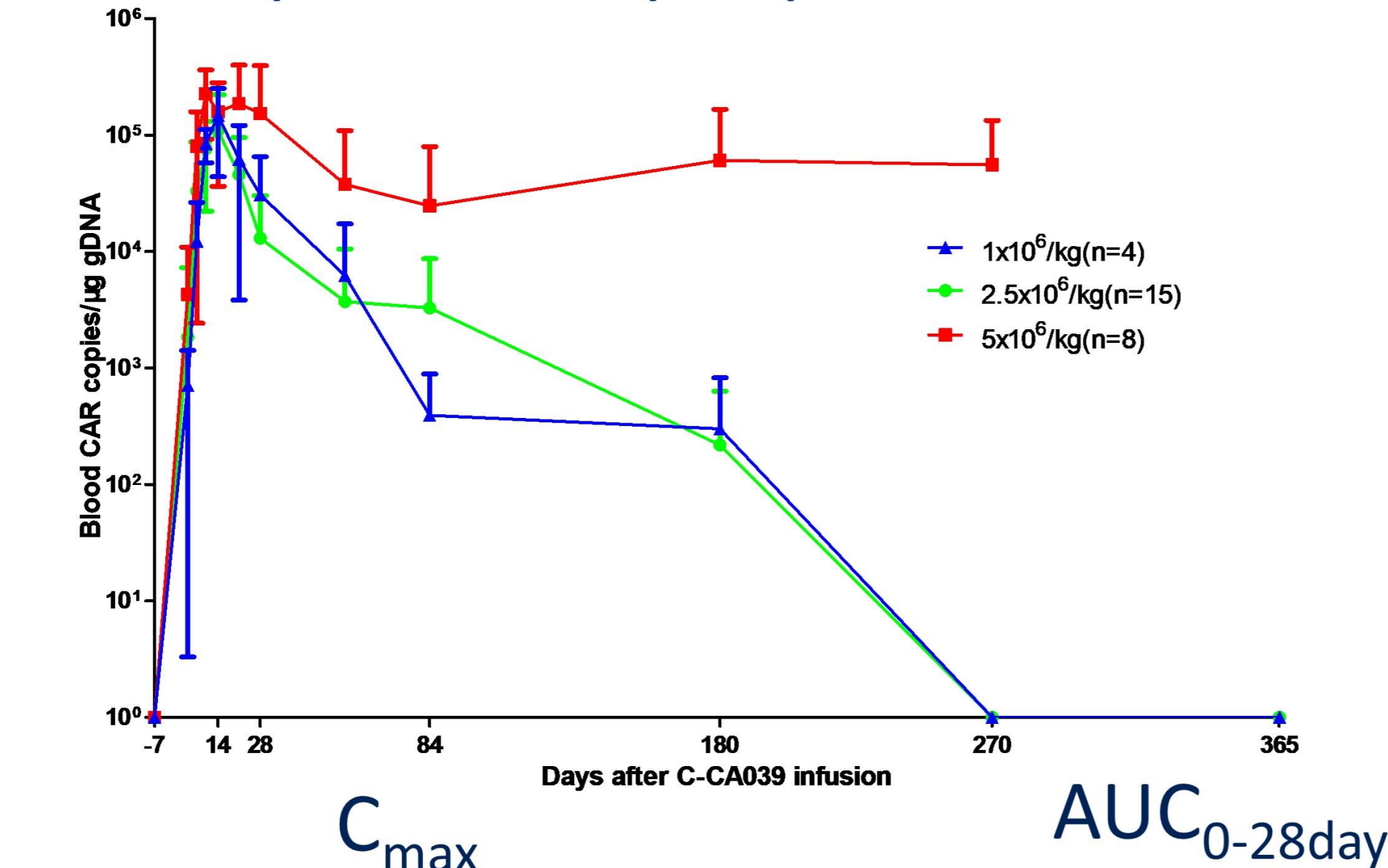
Subgroup Analysis of Patients with Best Response of CR



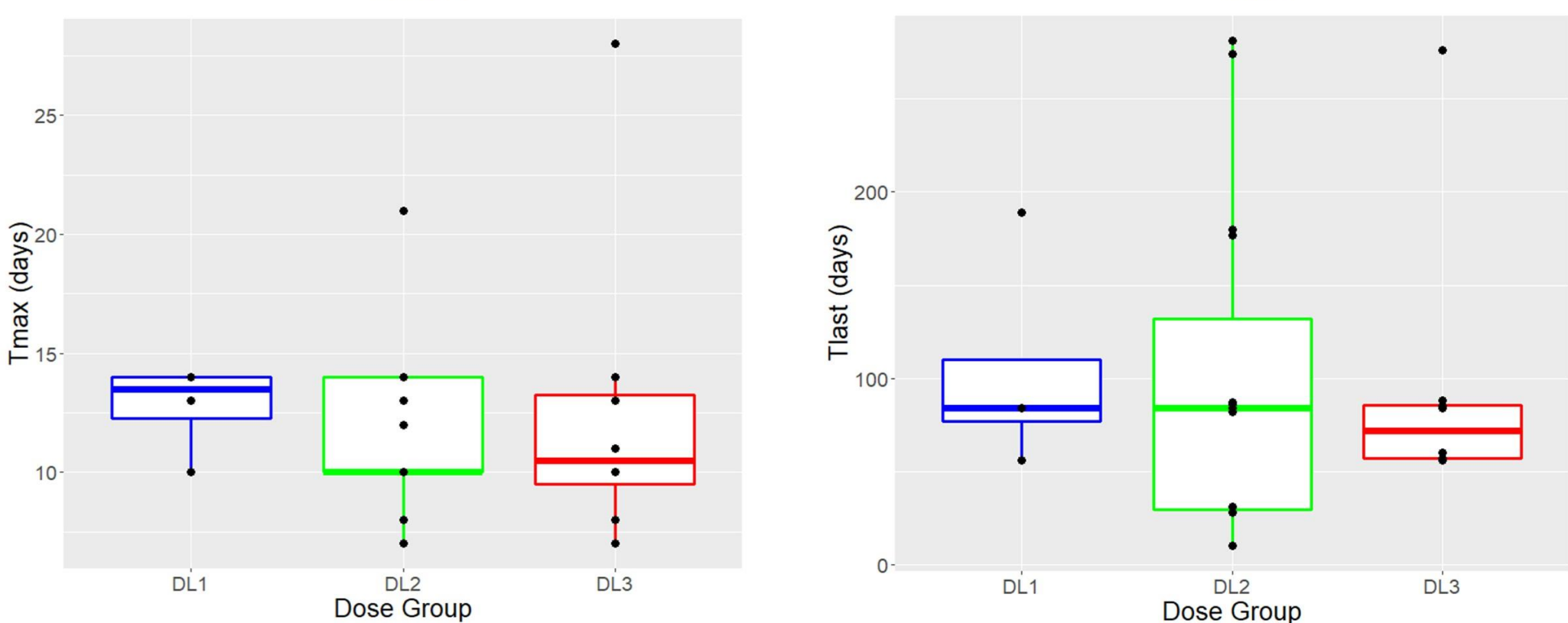
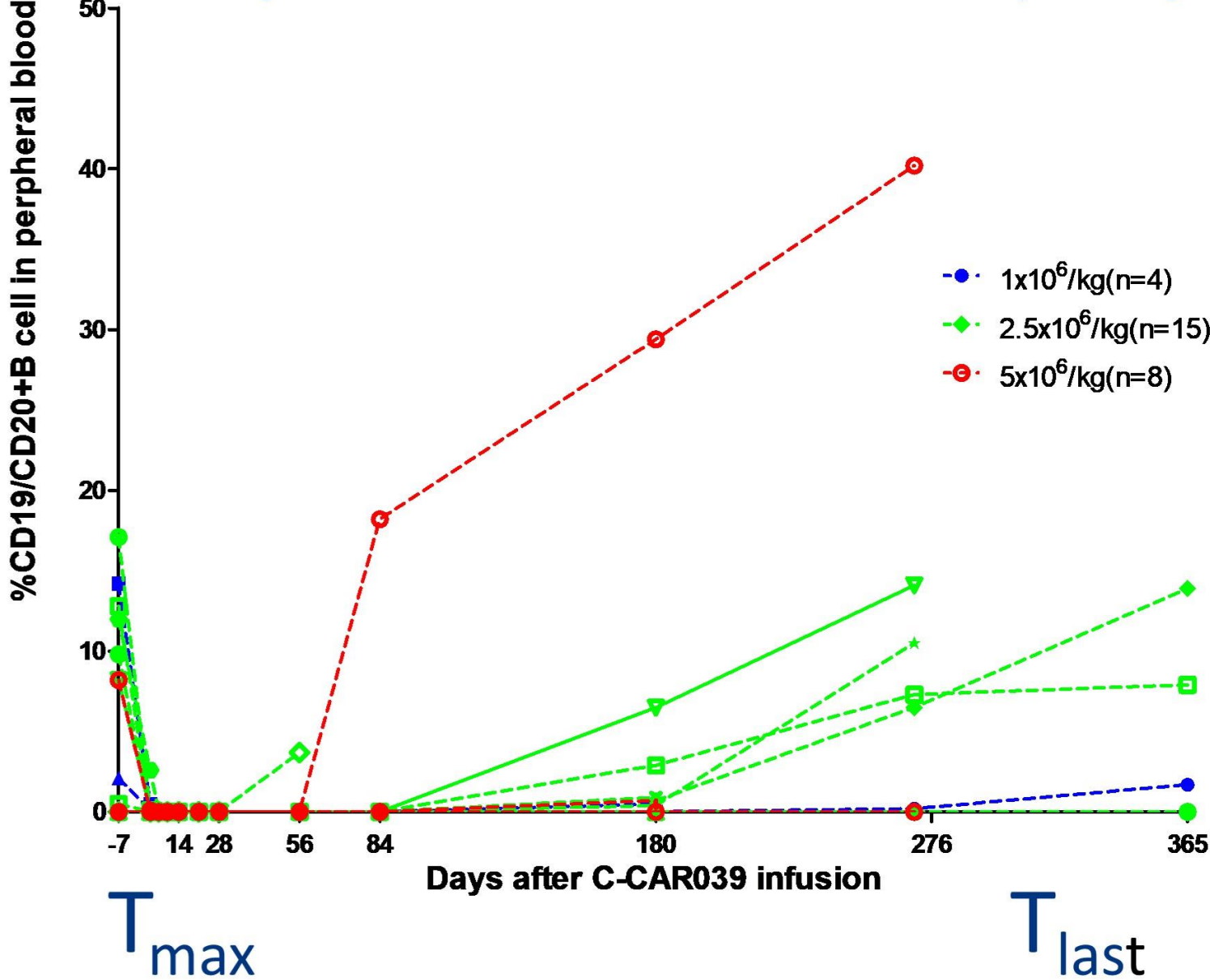
- CR rate was consistent among key subgroups

C-CAR039 PK/PD Profile

CAR-T expansion in peripheral blood over time



B cell depletion and recovery in peripheral blood



Conclusions

Of 28 patients evaluable for safety, 26 (92.9%) experienced CRS, and only 1 (3.6%) was grade 3

- 4 (14.3%) patients received tocilizumab alone, 1 (3.6%) patient received corticosteroids alone, and 1 (3.6%) patient received both tocilizumab and corticosteroids
- Higher dose groups showed shorter time for CRS onset and longer resolution time

2 (7.1%) patients experienced a grade 1 ICANS, both in highest dose group

- 1 (3.6%) patient received corticosteroids

Of 27 patients evaluable for efficacy, C-CAR039 treatment resulted in an ORR of 92.6% and a CR rate of 85.2% in r/r NHL predominantly DLBCL patients

- Median time to response and to CR were both 1.0 month
- With median follow-up of 7.0 months, the median DOR has not yet been reached

C-CAR039 proliferation and expansion in the peripheral blood correlated with B cell depletion

C-CAR039 has demonstrated a favorable safety profile and highly promising efficacy in patients with r/r B-NHL