

SWAG Network Oesophago- gastric (OG) Cancer Clinical Advisory Group

Research Update

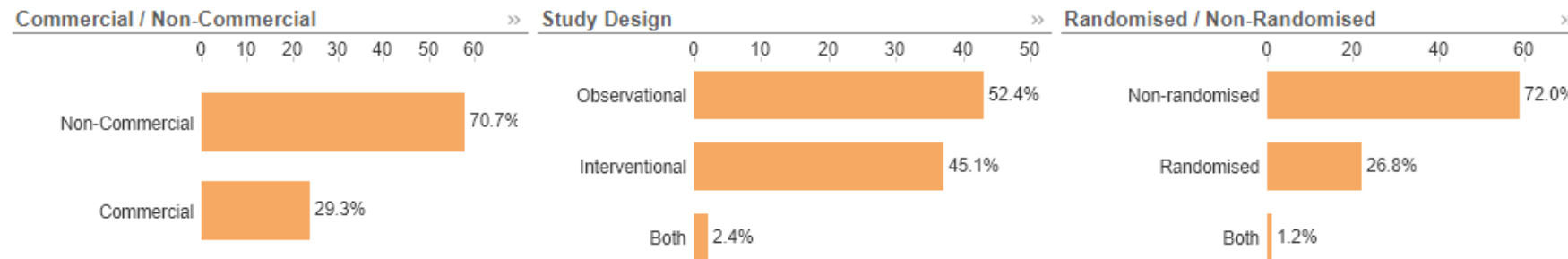
Sharath Gangadhara



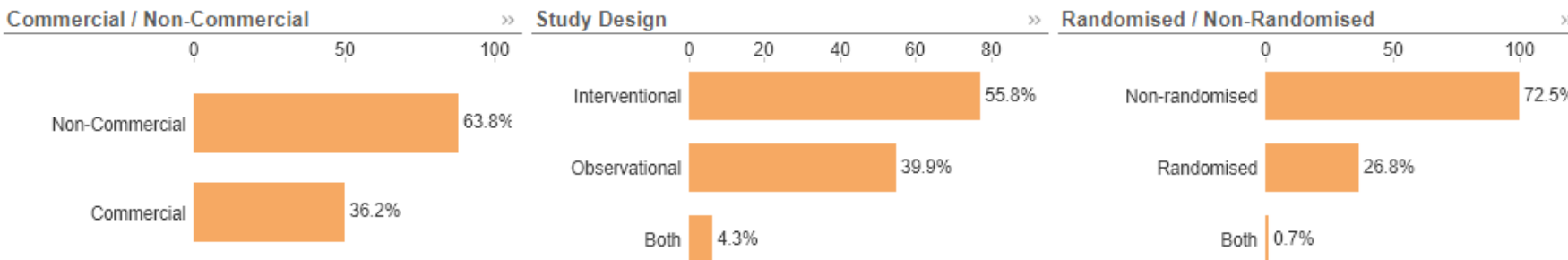
National Recruitment to Upper GI Cancer Studies



Apr 24 -
Oct 24

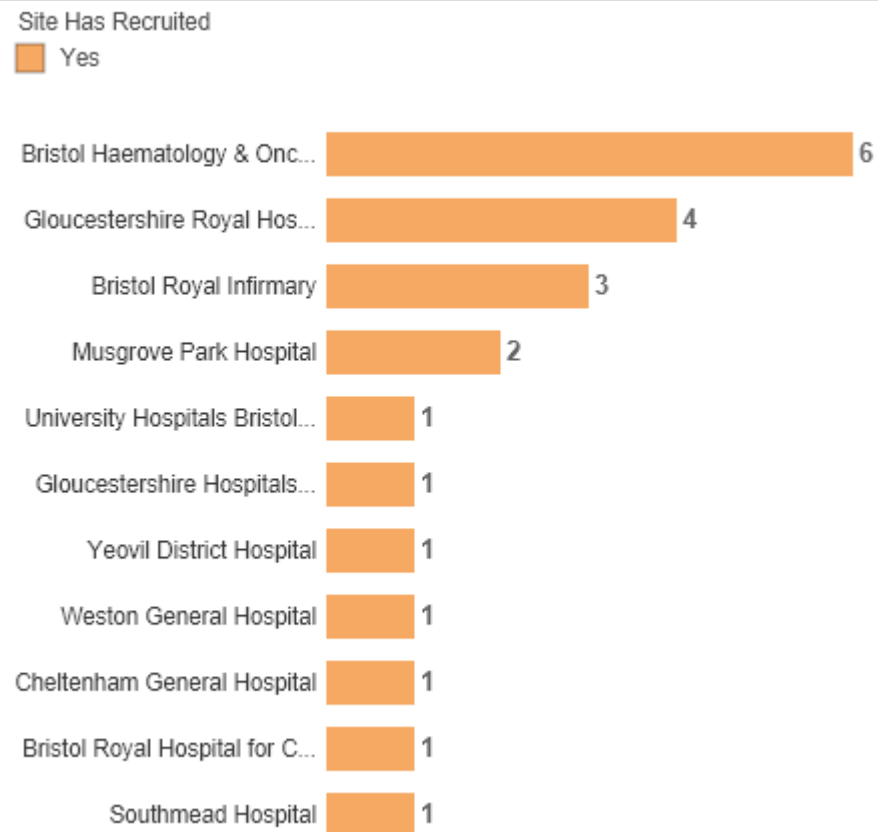


Apr 23 -
Mar 24

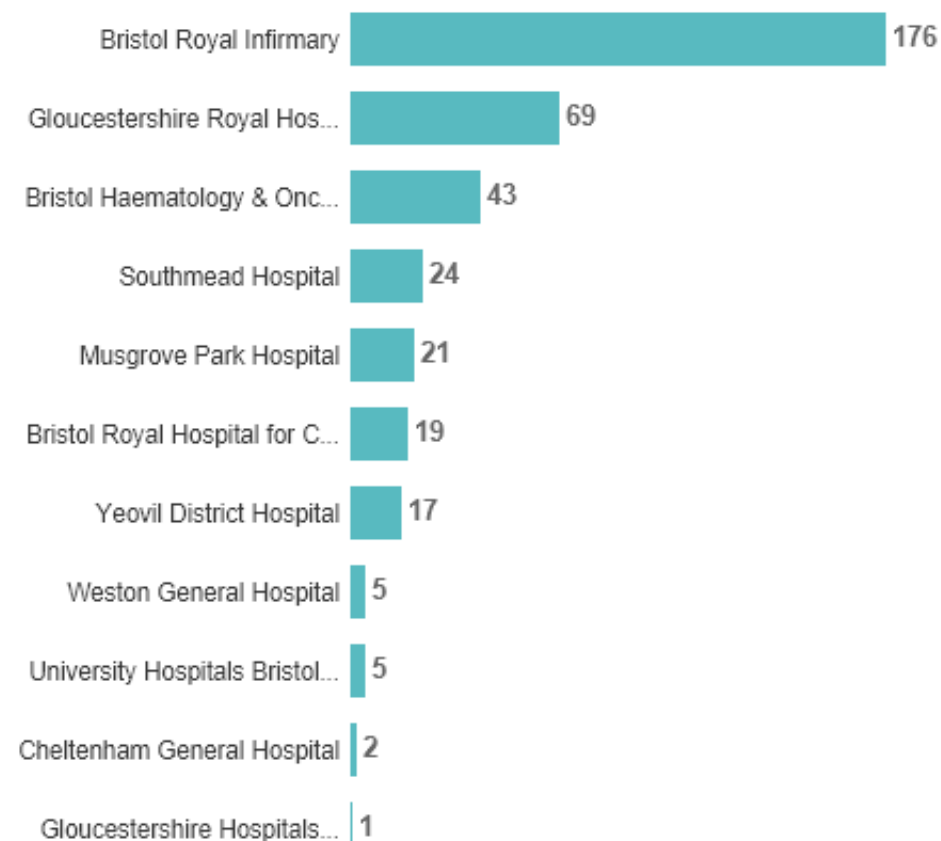


Recruitment to Upper GI Cancer Studies SWAG Region Apr 2023 - Oct 24

NUMBER OF STUDIES PARTICIPATING by Site



RECRUITMENT by Site



SWAG region Open OG Cancer Studies

CPMS	Short Name	Sites	Open	Closure	Sample Size Eng	Eng Recruits
55713	PICCOS	UHBW, RUH, SOM, SAL	18/01/2024	30/04/2026	0	0
54679	VALUE	SOM	22/05/2024	30/10/2025	150	0
54168	Gastric Platform Study	SOM	01/09/2023	30/09/2024	6	4
44579	DESTINY-Gastric 03	UHBW	15/07/2021	31/08/2024	9	9
49425	HERIZON-GEA-01	UHBW	11/04/2022	30/06/2024	11	10
50090	Ph1b/3 Bemarituzumab in Advanced Gastric Gastroesophageal Cancer	UHBW	30/06/2022	14/12/2024	26	13
59207	VISON; Version 1.0	UHBW	01/12/2023	30/11/2026	350	29
39995	Genomic Analyses of Endocrine and Neuroendocrine tumours	SAL	21/09/2020	31/12/2026	200	81
51510	MX39897: Registry in patients profiled with NGS	UHBW, SOM, GHFT	12/05/2023	31/12/2026	100	89
42784	Early diagnosis of upper digestive tract disease	SAL	01/10/2019	01/02/2025	300	169
55905	Surveillance After Resection of Oesophageal and Gastric cancer trial	UHBW, SOM	09/06/2023	31/10/2025	800	223
45162	MOSAICC STUDY	GHFT, SAL	18/08/2020	31/12/2024	460	282
20358	SCOPE 2	UHBW, SOM, GHFT	15/12/2015	30/11/2025	306	332
50774	Augmented biomarker response in oesophagogastric cancer	SAL	28/02/2022	01/09/2024	858	381
54878	AspECT EXceL	SOM, GHFT	24/05/2023	31/07/2024	1287	537
42082	Non-Invasive Testing for Early Oesophageal Cancer and Dysplasia	SAL	19/08/2019	01/10/2024	900	867
8880	OCCAMS: Multicentre Study Determining Predictive Biomarkers & Targets for Oesophageal Adenocarcinoma	GHFT	19/07/2010	31/03/2026	5000	4023
15941	NIHR BioResource - Rare Diseases	UHBW, RUH, NBT, SAL, SOM	13/09/2012	30/11/2024	22000	20767

SWAG region In Setup OG Cancer Studies

CPMS	Commercial Study	Short Name	Planned Opening	Planned Closure	Sample Size UK	Sponsor	All Funders	CI Name
63445	Commercial	Phase 1 study of GSK5733584 in advanced Solid Tumours	27/09/2024	25/04/2025	18	GLAXOSMITHKLINE RESEARCH & DEVELOPMENT LIMITED	GLAXOSMITHKLINE RESEARCH & DEVELOPMENT LIMITED	-
60119	Non-Comm	ZODIAC	01/08/2024	01/04/2026	50	THE ROYAL MARSDEN NHS FOUNDATION TRUST	Gilead Sciences Inc	naureen starling
59351	Non-Comm	ROSE	01/11/2024	15/01/2026	206	UNIVERSITY HOSPITALS BRISTOL AND WESTON NHS FOUNDATION TRUST	NIHR Central Commissioning Facility (CCF)	Kerry Avery
58692	Commercial	AZD0901 Ph3 Gastric	30/04/2024	27/03/2026	40	AstraZeneca UK Limited	AstraZeneca UK Limited	-
58100	Non-Comm	A Phase I/II trial of UCB4594 in participants with advanced cancer.	24/06/2024	01/11/2028	167	Cancer Research UK	Cancer Research UK	Fiona Thistlethwaite
57395	Commercial	AZD0901 CLDN18.2 ADC	01/05/2024	19/08/2025	8	AstraZeneca UK Limited	AstraZeneca UK Limited	-

Peri-operative Zimberelimab (Anti-PD-1) vs Zimberelimab in Combination With Domvanalimab (Anti-TIGIT) in Resectable Mismatch Repair Deficient/Micro-satellite Unstable Gastric and Gastro-oesophageal Junctional Adenocarcinoma (ZODIAC)

-

ZODIAC

- Primary objective:
 - (pCR) rate as compared to standard FLOT chemotherapy in resectable dMMR/MSI-H gastric/GOJ AC
- Secondary objectives
 - Safety and tolerability of zimberelimab+/- domvanalimab
 - Efficacy of zimberelimab+/- domvanalimab in terms of radiological RR, R0 resection rate, PFS and OS.
 - Surgical outcomes following treatment with zimberelimab +/- domvanalimab
 - Translational analyses on tissue and blood biomarkers aimed at identifying those who derive the most benefit from this immunotherapy combination, and those who are non/poor responders.

ROSE-Reporting Outcomes and Symptoms Electronically after surgery

- 206 patients undergoing surgery for oesophago-gastric cancer at six NHS hospitals in England.
- Patients will be randomly placed in one of two groups. Patients in the 'ROSE tool' group will be asked to report their symptoms using an electronic (online/web-based) information tool while also receiving their usual care.
- Depending on the seriousness of reported symptoms, the ROSE tool will provide information about how to manage these symptoms and/or inform them to contact their healthcare team.
- Patients in the 'usual care' group will receive their usual clinical care and will not use the ROSE tool to complete the symptom-report questionnaire or to receive symptom management information.

Background on CLDN18.2-positive, HER2-negative unresectable advanced gastric/gastro-oesophageal junction adenocarcinoma

Gastric (G)/gastro-oesophageal junction (GEJ) cancer are most common types of stomach cancer

Epidemiology:

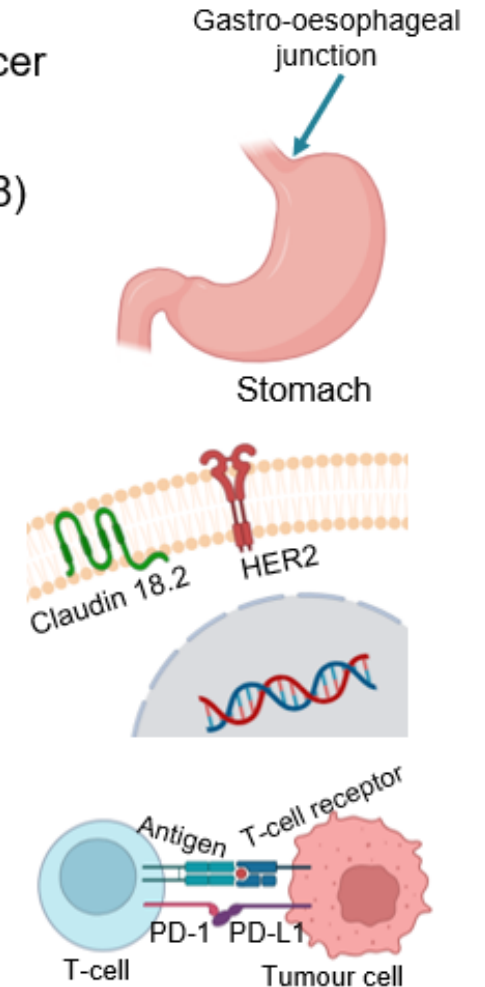
- On average, 3,405 men diagnosed with GC vs 1,810 women in England per year (2016-2018)
- Around half of all new cases of GC in UK diagnosed in people ≥ 75 years old

Diagnosis and classification

- G/GEJC similar histologically and in treatment response – commonly combine population in trials
- Management evolving towards biomarker identification with targeted treatment options – include HER2, PD-L1, and CLDN18.2
- G/GEJC often diagnosed in late stage because of nature of symptoms

Symptoms and prognosis

- Initial vague symptoms and similar to other stomach conditions
- In advanced stage may include – lack of appetite and subsequent weight loss; fluid in abdomen; abdominal pain; gastric obstruction; vomiting blood; blood in stool or black stool
- 5-year survival (diagnosed 2013-2017): 21.6%, reducing to 13.9% in people ≥ 75

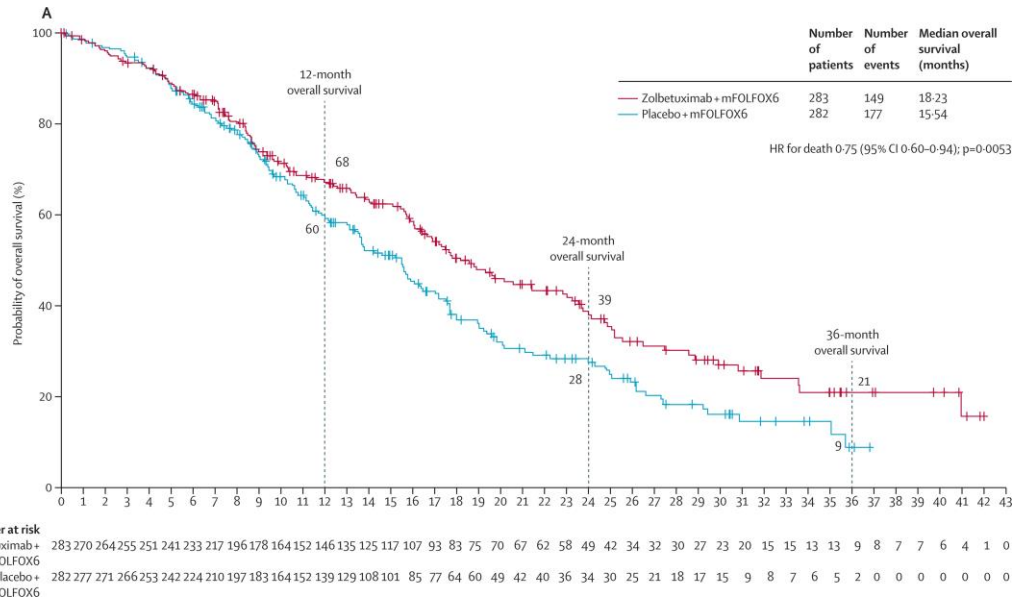


AZD0901 Ph3 Gastric

- Claudin 18.2, a tight-junction molecule predominantly found in the non-malignant gastric epithelium, becomes accessible on the tumour cell surface during malignant transformation, thereby providing an appealing target for cancer therapy.
- Zolbetuximab has been studied in two main Phase 3 clinical trials –
 - SPOTLIGHT - first line zolbetuximab + mFOLFOX6 versus placebo + mFOLFOX6 in patients with CLDN18.2-positive, HER2-negative, stomach or GOJ (advanced/metastatic)
 - GLOW- first-line zolbetuximab + CAPOX versus placebo + CAPOX in patients with CLDN18.2-positive, HER2-negative, stomach or GOJ cancer (advanced/metastatic)

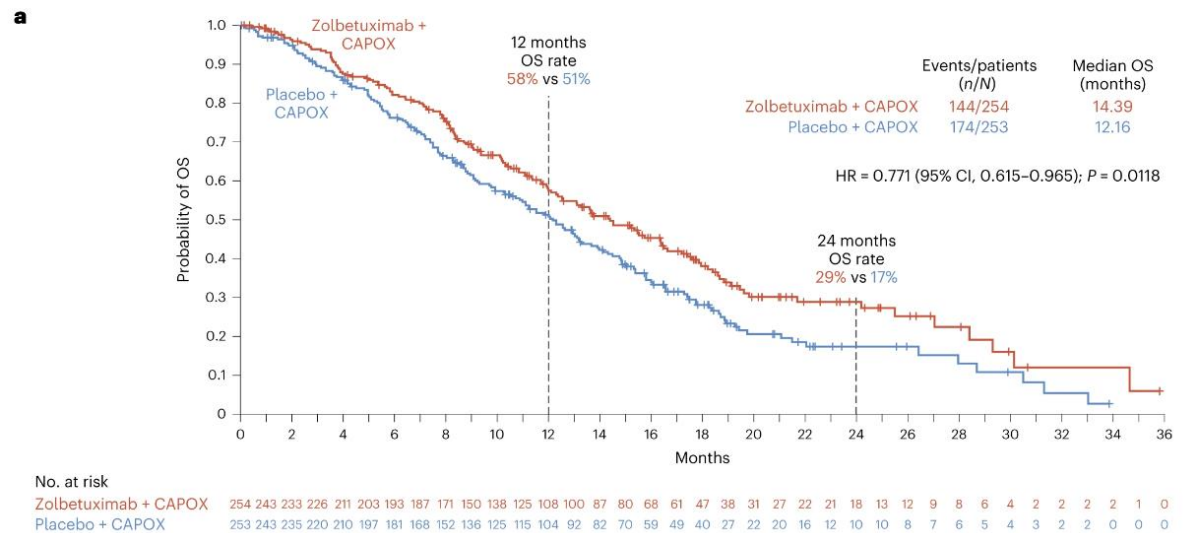
Claudin 18.2 First line

SPOTLIGHT



GLOW

From: [Zolbetuximab plus CAPOX in CLDN18.2-positive gastric or gastroesophageal junction adenocarcinoma: the randomized, phase 3 GLOW trial](#)



AZD0901 Ph3 Gastric

- A Phase III Multi-center, Open-label, Sponsor-blinded, Randomized Study of AZD0901 Monotherapy Compared with Investigator’s Choice of Therapy in Second- or Later-Line Adult Participants with Advanced/Metastatic Gastric or Gastroesophageal Junction Adenocarcinoma Expressing Claudin18.2

<i>Arms</i>	<i>Assigned Interventions</i>
Experimental: AZD0901 arm 1 Participants in the AZD0901 arm 1 will receive AZD0901 dose level 1 intravenous infusion treatment.	Drug: AZD0901 Participants in the AZD0901 arm 1 will receive dose level 1 AZD0901 IV
Experimental: AZD0901 Arm 2 Participants in the AZD0901 arm 2 will receive AZD0901 dose level 2 intravenous infusion treatment.	Drug: AZD0901 Participants in the AZD0901 arm 2 will receive dose level 2 AZD0901 IV
Active Comparator: Investigator's choice arm Participants in the Investigator's choice arm will receive a regimen of Investigator's choice, including regionally accepted chemotherapies or targeted therapies.	Drug: Ramucirumab+ paclitaxel Ramucirumab 8 mg/kg IV on Days 1 and 15 and paclitaxel 80 mg/m ² IV on Days 1, 8, and 15, Q4W Drug: Paclitaxel Paclitaxel 80 mg/m ² IV on Days 1, 8, and 15, Q4W (for participants with contraindication to ramucirumab only) Drug: Docetaxel Docetaxel 75-100 mg/m ² IV on Day 1, Q3W (for participants with contraindication to ramucirumab only) Drug: Irinotecan Irinotecan 150-180 mg/m ² IV on Days 1 and 15, Q4W Drug: TAS-102 TAS-102 35 mg/m ² up to a maximum of 80 mg orally twice a day on Days 1 to 5 and Days 8 to 12, Q4W (except China)

Pressurised IntraPeritoneal Aerosolised Chemotherapy (PIPAC) in the management of cancers of the colon, ovary and stomach: a randomised controlled phase II trial of efficacy in peritoneal metastases (PICCOS)

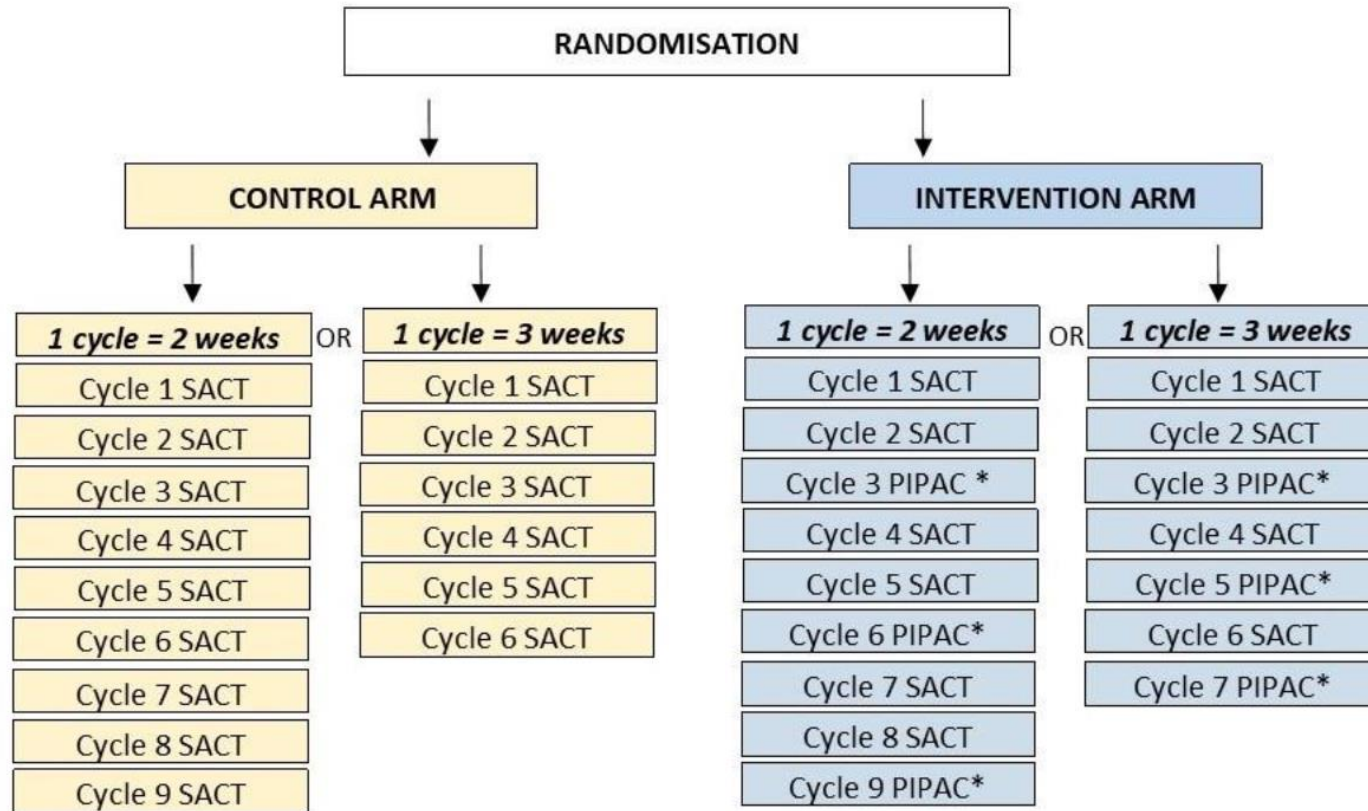
Inclusion Criteria

- Visible measurable peritoneal lesion(s) on computerised tomography (CT) imaging
- PM from histologically proven primary adenocarcinoma (any subtype) of stomach or Siewert type 3 gastro-oesophageal junction tumour
- Any Human Epidermal Growth Factor Receptor 2 (HER2) status or Combined Positive Score (CPS)

Exclusion criteria

- Extra-peritoneal metastases (with the exception of retroperitoneal lymph nodes)
- Prior systemic anti-cancer therapy, radiotherapy or surgery for stomach cancer
- Gastric or duodenal stent in-situ
- Gastro-oesophageal junction Siewert Type 1 or Type 2 tumour
- Symptoms and/or radiology suggestive of impending and/or current bowel obstruction
- Uncontrolled and persistent ascites

Figure 3 Stomach group treatment schema



* +/- nivolumab or hereceptin (if applicable) on day 2 or 3

Associate PI Scheme

<https://www.nihr.ac.uk/health-and-care-professionals/career-development/associate-principal-investigator-scheme.htm>

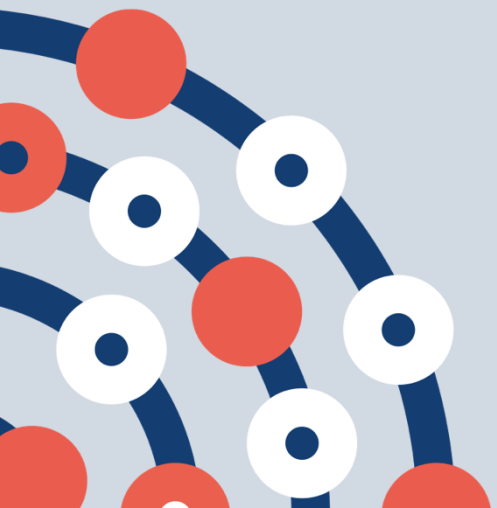
A six month in-work training opportunity, providing practical experience for healthcare professionals starting their research career. People who would not normally have the opportunity to take part in clinical research in their day to day role have the chance to experience what it means to work on and deliver a NIHR portfolio trial under the mentorship of an enthusiastic Local PI.

PIs working with a CTU can register their study on the scheme

<https://www.nihr.ac.uk/health-and-care-professionals/career-development/register-your-study-for-the-associate-principal-investigator-scheme.htm>



Research Delivery Network vision, mission and purpose



Research Delivery Network

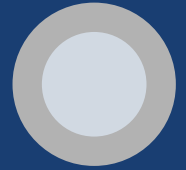
Vision

The UK is a global leader in the delivery of high quality, commercial and non commercial research that is inclusive, accessible and improves health and care.

Mission

Enabling the health and care system to attract, optimise and deliver research across England.

We do this as part of the NIHR's overall mission to improve the health and wealth of the nation through research.



Research Delivery Network (RDN) purpose

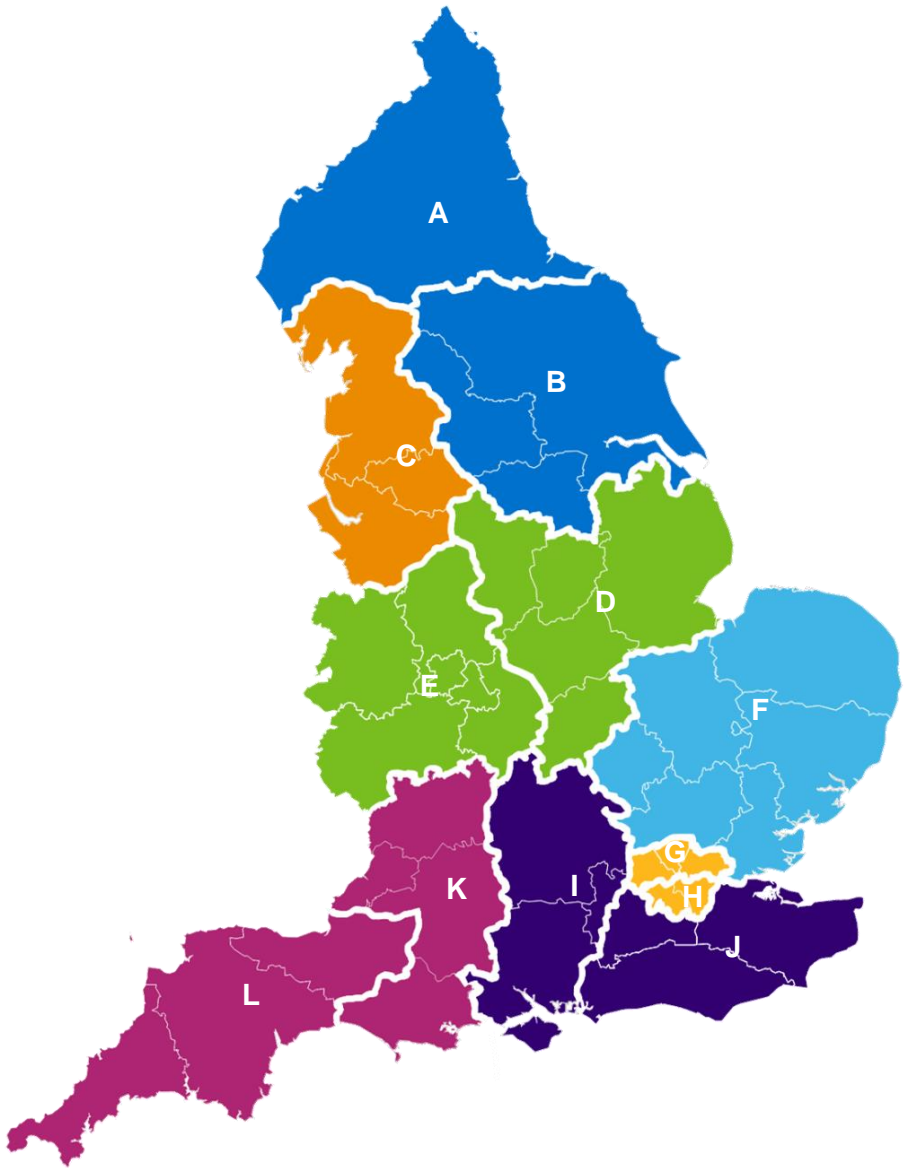
- Support the successful delivery of high quality research, as an active partner in the research system.
- Increase capacity and capability of the research delivery infrastructure for the future.

This means
research can:

- Reach more people
- Address changing population needs
- Support the successful delivery of high quality research
- Increase capacity and capability of the research delivery infrastructure for the future

Combined Regional (Network) map

NHS England Region	Regional Research Delivery Network (RRDN)		RRDN Hosts
North East and Yorkshire	A	North East and North Cumbria	The Newcastle upon Tyne Hospitals NHS Foundation Trust
	B	Yorkshire and Humber	Leeds Teaching Hospitals NHS Trust
North West	C	North West	Manchester University NHS Foundation Trust
Midlands	D	East Midlands	University Hospitals Of Leicester NHS Trust
	E	West Midlands	The Royal Wolverhampton NHS Trust
East of England	F	East of England	Norfolk and Norwich University NHS Foundation Trust
London	G	North London	Barts Health NHS Trust
	H	South London	Guy's & St Thomas' NHS Foundation Trust
South East	I	South Central	University Hospital Southampton NHS Foundation Trust
	J	South East	Royal Surrey NHS Foundation Trust
South West	K	South West Central	University Hospitals Bristol and Weston NHS Foundation Trust
	L	South West Peninsula	Royal Devon University Healthcare NHS Foundation Trust



[NIHR ODP https://odp.nihr.ac.uk/](https://odp.nihr.ac.uk/)

Open data platform. Data on performance and restart across whole CRN, including all specialty areas

[NIHR Be Part of Research https://www.ukctg.nihr.ac.uk/](https://www.ukctg.nihr.ac.uk/)

See which studies are open across the country

[National Cancer Research Institute Portfolio Maps](http://csg.ncri.org.uk/portfolio/portfolio-maps/)

<http://csg.ncri.org.uk/portfolio/portfolio-maps/>

View current national portfolio of open, closed and 'in set up' cancer studies

[Find a Clinical Research Study \(ODP\) http://csg.ncri.org.uk/portfolio/portfolio-maps/](http://csg.ncri.org.uk/portfolio/portfolio-maps/)

Search for a study to fit criteria. Good for horizon scanning, eligibility criteria

RRDN Contacts

swc.rrdn@nihr.ac.uk

Study Support Service Manager: claire.matthews@nihr.ac.uk