PSMA and FDG-PET as predictive and prognostic biomarkers in patients given [177Lu]Lu-PSMA-617 versus cabazitaxel for metastatic castration-resistant prostate cancer (TheraP ANZUP 1603): a biomarker analysis from a randomised, open-label, phase 2 trial

James P Buteau, Andrew J Martin, Louise Emmett, Amir Iravani, Shahneen Sandhu, Anthony M Joshua, Roslyn J Francis, Alison Y Zhang, Andrew M Scott, Sze-Ting Lee, Arun A Azad, Margaret M McJannett, Martin R Stockler, Scott G Williams, Ian D Davis, Michael S Hofman

for the TheraP Trial Investigators and the Australian and New Zealand Urogenital and Prostate Cancer Trials Group

TOP Trials Session 1: Best International Trials

Sunday, October 16, 2022

EANM'22 Annual Congress





EANM Disclosure of Interest Statement

1. I hold a position as an employee, consultant, assessor or advisor for a pharmaceutical, device or biotechnology company.

No

2. I receive support from a pharmaceutical, device or biotechnology company.

No

3. I hold property rights/patents for (radio)pharmaceuticals, medical devices or medical consulting firms.

No

4. I have written articles for (radio)pharmaceutical, medical device, biotechnology or consulting companies during the last 5 years.

No



EANM Disclosure of Interest Statement

Co-authors (unrelated to this work)

MSH reports grants from Novartis, ANSTO, Bayer, Isotopia; and consulting fees for lectures or advisory boards from Astellas, AstraZeneca, Janssen, Merck Sharp and Dohme (MSD), Mundipharma, and Point Biopharma.

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All other authors declare no competing interests.



THE LANCET Oncology

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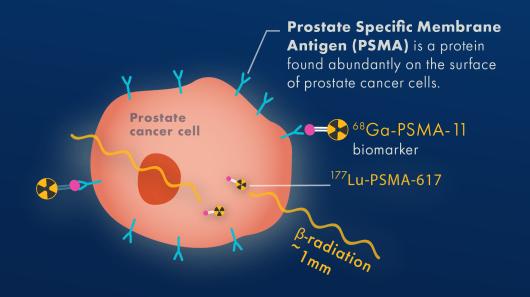
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PSMA PET as a predictive biomarker FDG PET as a prognostic

in a randomised phase II trial of CABAZITAXEL versus 177Lu-PSMA-617







TheraP: first randomized trial comparing LuPSMA vs. cabazitaxel¹

- 1° endpoint: PSA-50RR 66% *vs.* 37% (29% difference [95%Cl 16-42]; p < 0.001)
- 2° endpoint: Lu-PSMA delayed progression HR 0.63 (95%ci 0.46-0.86 P=0.0028)

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Patient selection



PSMA PET

to measure intensity of PSMA uptake (SUVmean)

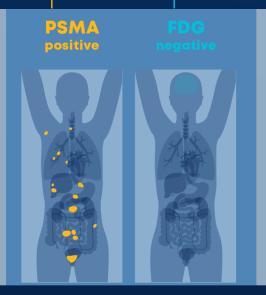


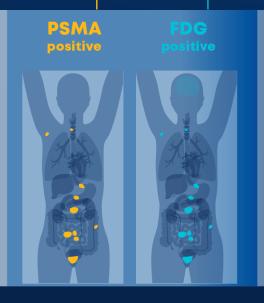
FDG PET

to measure Metabolic Tumor Volume (MTV)

SUVmax ≥20 on ⁶⁸Ga-PSMA at a site of disease

No sites of disease FDG positive/PSMA negative



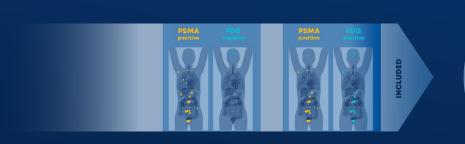


INCLUDED

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Hypotheses

- 个PSMA intensity: 个response to LuPSMA *vs.* Cabazitaxel
- ↑FDG volume: √response to either





50% patients treated with

¹⁷⁷Lu-PSMA-617

8.5 GBq IV q6 weekly
0.5 GBq each cycle
Up to 6 cycles

Responses defined according to PSA50-RR (1º endpoint), and PSA-PFS and rPFS (2º endpoints)

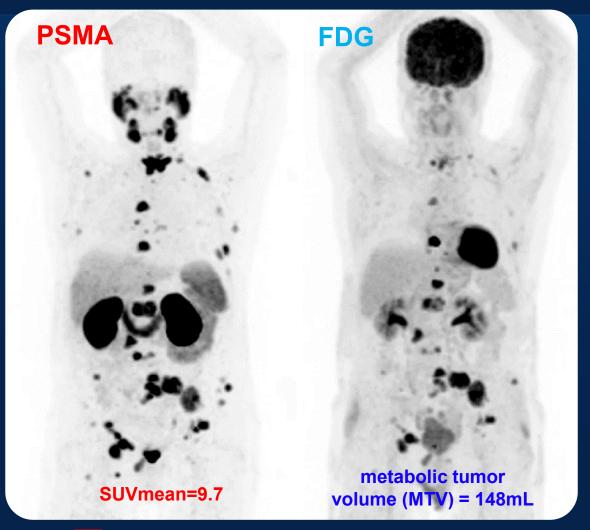
Binary and PFS endpoints were analysed using logistic and Cox regression, respectively.

Data cut-off as per Lancet 2021¹

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PET scan quantification

- Centrally collected with WIDEN²
- Prospectively contoured with MIM Software
- Pre-defined cut-off points for contouring³

Baseline characteristics

	Cabazitaxel (n = 101)	Lu-PSMA (n = 99)
PSMA SUVmean ≥ 10	30/101 (30%)	35/99 (35%)
FDG volume ≥200 mL	30/101 (30%)	30/99 (30%)

SUV ≥ 3 SUV > liver_{mean} + 2 SD

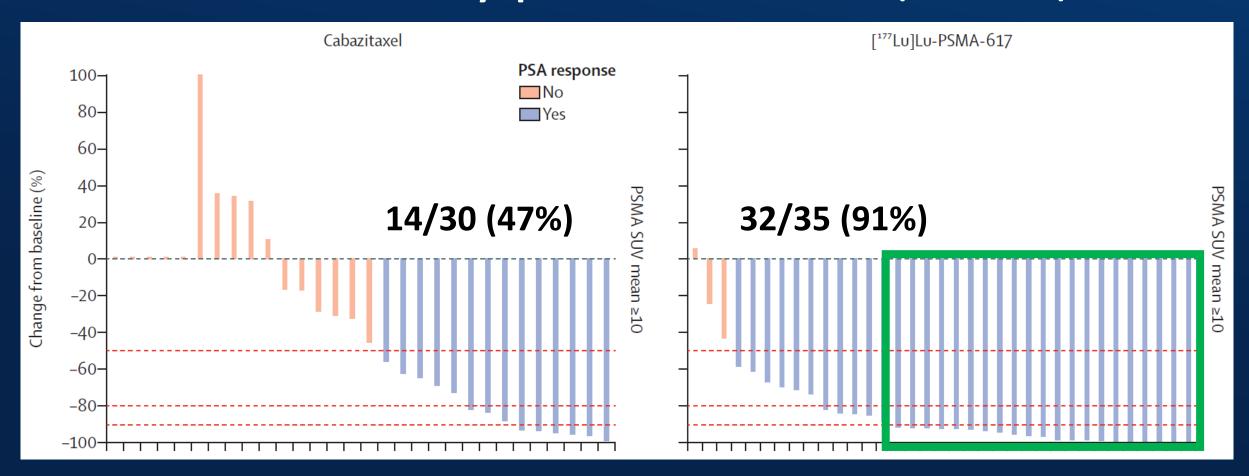
² Chauvie S Clin Trials 2014; 11: 355-361

³ Ferdinandus J Eur J Nucl Med Mol Imaging 2020;47:2322-2327

in a randomised phase II trial of CABAZITAXEL versus 177Lu-PSMA-617



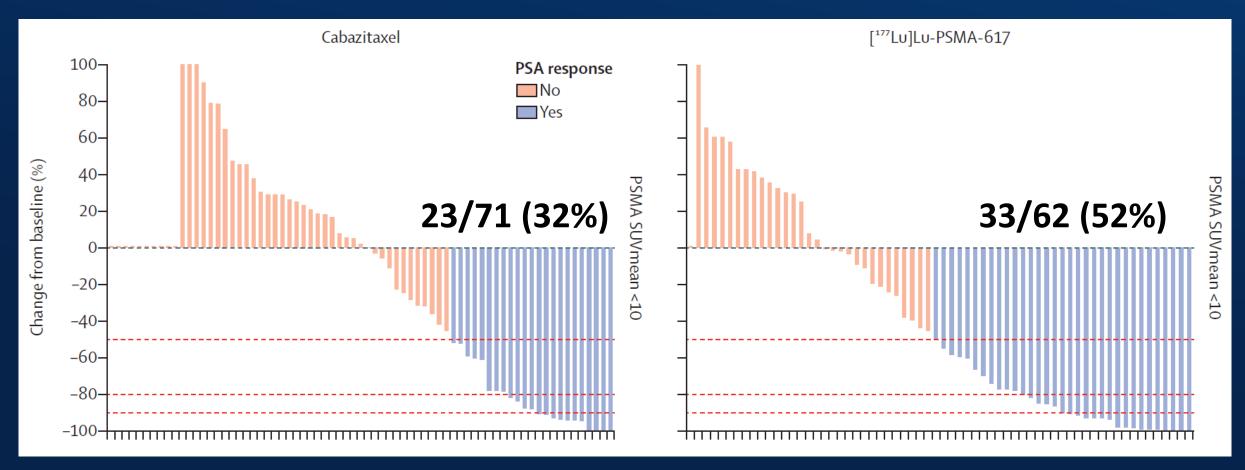
PSMA intensity: predictive biomarker (PSA50-RR)





in a randomised phase II trial of CABAZITAXEL versus 177Lu-PSMA-617

PSMA intensity: predictive biomarker (PSA50-RR)



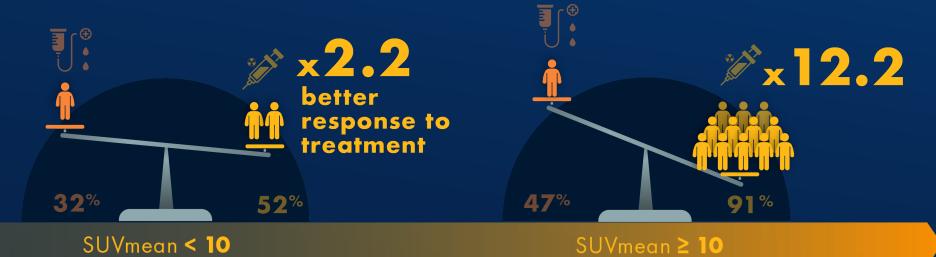
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in a randomised phase II trial of CABAZITAXEL versus 177Lu-PSMA-617

Odds Ratio

PSA reduction ≥ 50%

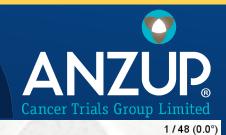




Higher PSMA intensity = better response to LuPSMA vs Cabazitaxel p=0.031; p_{adi} = 0.039

PSMA PET as a predictive biomarker FDG PET as a prognostic

in a randomised phase II trial of **CABAZITAXEL** versus ¹⁷⁷Lu-PSMA-617





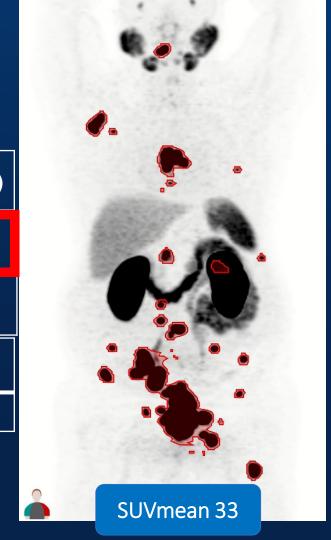


PSMA SUVmean	Q1 (<6.9)	Q2 (≥6.9 to <8.5)	Q3 (≥8.5 to <10.8)	Q4 (≥10.8)
PSA50-RR (LuPSMA)	6/21 (29%)	18/29 (62%)	17/22 (77%)	24/27 (89%)
PSA50-RR (Cabazitaxel)	12/28 (43%)	3/20 (15%)	11/30 (37%)	11/23 (48%)
OR (95% CI)	0.53 (0.15 -1.74)	9.3 (2.44 – 46.7)	5.9 (1.79 – 22.2)	8.7 (2.25 – 44.4)
p-value	0.3	0.002	0.005	0.003







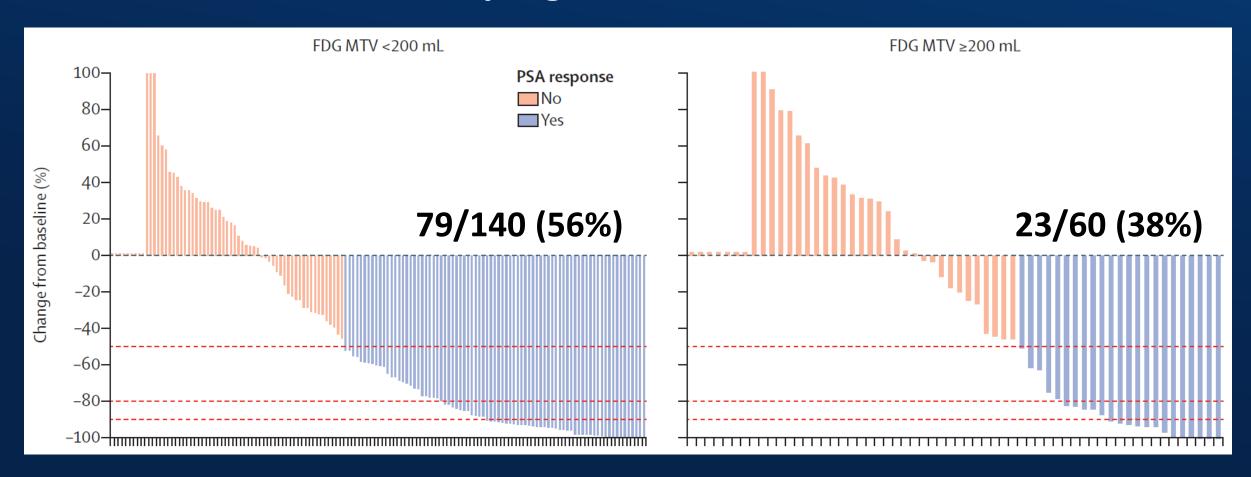


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FDG volume: prognostic biomarker (PSA50-RR)



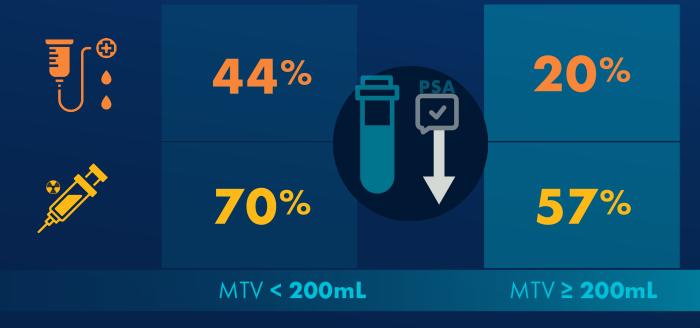
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in a randomised phase II trial of CABAZITAXEL versus 177Lu-PSMA-617

Response Rate

PSA reduction ≥ 50%





Higher FDG volume = worse response to either LuPSMA or Cabazitaxel Odds ratio 0.44; p=0.014, $p_{adj}=0.35$

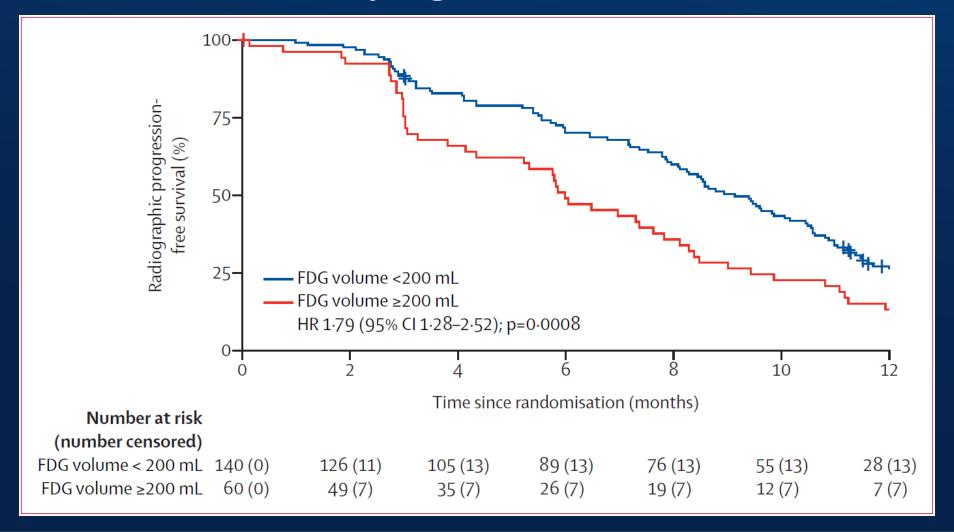
PSMA PET as a predictive biomarker FDG PET as a prognostic

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in a randomised phase II trial of CABAZITAXEL versus 177Lu-PSMA-617

FDG volume: prognostic biomarker (rPFS)



PSMA PET as a predictive biomarker FDG PET as a prognostic

in a randomised phase II trial of CABAZITAXEL versus 177Lu-PSMA-617



Strengths

Prospective, randomized, multi-center

PSMA + FDG

Pre-specified predictive and prognostic biomarkers

Weaknesses

Manual contouring: labor intensive

No information in patients with lower PSMA expression (>liver, SUVmax<20)

No OS (analysis planned)

Clinical Implications

High PSMA uptakePrioritize LuPSMA

High FDG volume

Research for treatment intensification

Quantitative PET parameters valuable

PSMA PET as a predictive biomarker FDG PET as a prognostic



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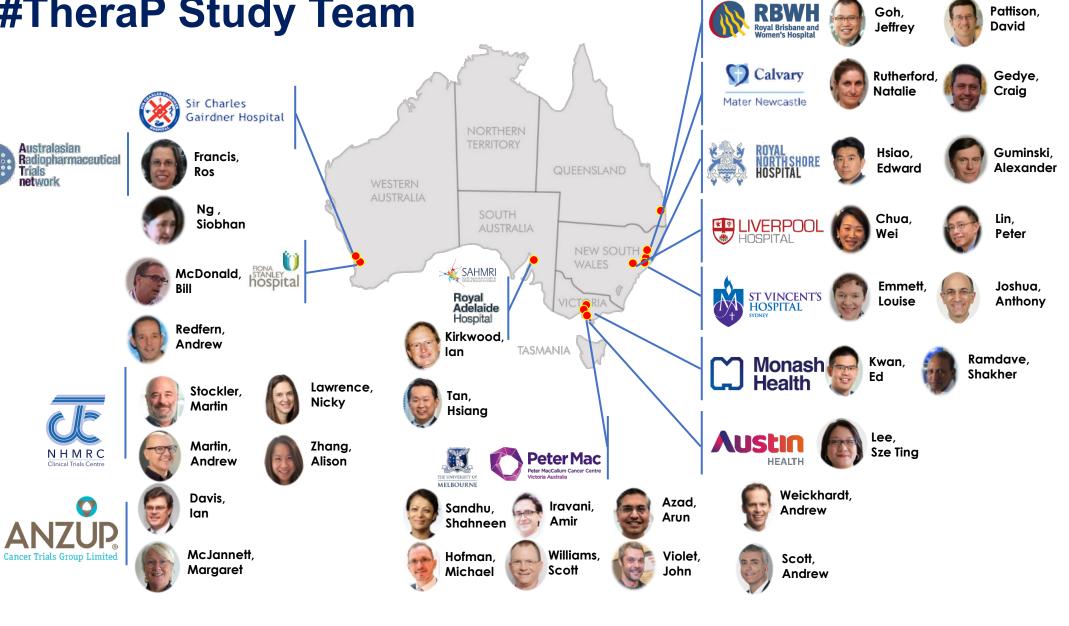
Conclusion

In patients with mCRPC,

High PSMA expression (SUVmean≥10) was *predictive* of a higher likelihood of favorable response to LuPSMA than cabazitaxel

A high volume of disease on FDG PET (MTV>200mL) was associated with worse *prognosis* regardless of randomly assigned treatment

#TheraP Study Team



Pattison,

David

Goh,

Jeffrey

All slides can be downloaded at: www.anzup.org.au/therap

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- Australasian Radiopharmaceutical Trials Network (ARTnet)







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