

## ELIGIBILITY CRITERIA (summarised)

### INCLUSION

- Age  $\geq$  18 years
- Diagnosis of Stage IB - IVB CTCL Mycosis Fungoides (MF)/Sézary Syndrome (SS)
- Have relapsed, are refractory or progressed after at least one systemic therapy
- Skin biopsy at the time of or within 6 months prior to study entry
- Have at least 1 cutaneous lesion suitable for palliative radiotherapy
- Have in addition at least 1 measurable lesion with a minimum mSWAT score of 10, or 2 or more cutaneous tumours, which will not be irradiated but must be measurable to assess the abscopal effect of the treatment
- Have a minimum wash-out and adverse event (AE) recovery period from previous treatments
- Have ECOG performance status of 0 or 1
- Demonstrate adequate organ function
- Female patients of childbearing potential should have a negative urine or serum pregnancy within 72 hours prior to receiving the first dose of study medication
- Female patients of childbearing potential must have a negative urine or serum pregnancy test
- Willing to comply with the contraception requirements
- Written informed consent

### EXCLUSION

- Received chemotherapy or targeted small molecule therapy within 4 weeks prior to study entry or has not recovered from adverse events due to agents administered  $\geq$ 4 weeks earlier
- Is currently or has participated in an IMP or device study within 4 weeks prior to the first dose of study medication
- Received any other monoclonal antibody within 4 weeks prior to the first dose of pembrolizumab or has not recovered ( $\leq$  grade 1 or to baseline level) from adverse events due to agents administered  $>$ 4 weeks earlier
- Active autoimmune disease requiring systemic treatment within the past 3 months or history of clinically severe autoimmune disease, or any other syndrome that requires systemic steroids or immunosuppressive agents.
- Has a diagnosis of immunodeficiency or is receiving systemic corticosteroid / immunosuppressive therapy within 7 days prior to the first dose of pembrolizumab
- Prior therapy with anti-PD-1, anti-PD-L1, anti-PD-L2
- Has known history of, or any evidence of active, non-infectious pneumonitis
- History of other pulmonary disease such as interstitial lung disease, emphysema or chronic obstructive pulmonary disease
- Has a known history of HIV
- Has a known history of active TB, Hepatitis B/C, or any psychiatric or substance abuse disorders that would interfere with the requirements of the trial
- Has received a live vaccine within 30 days prior to the planned start of study medication
- Patients who have previously received a solid organ transplant

## EXPLORATORY BIOLOGICAL STUDIES

### **Immune monitoring of primary tumour**

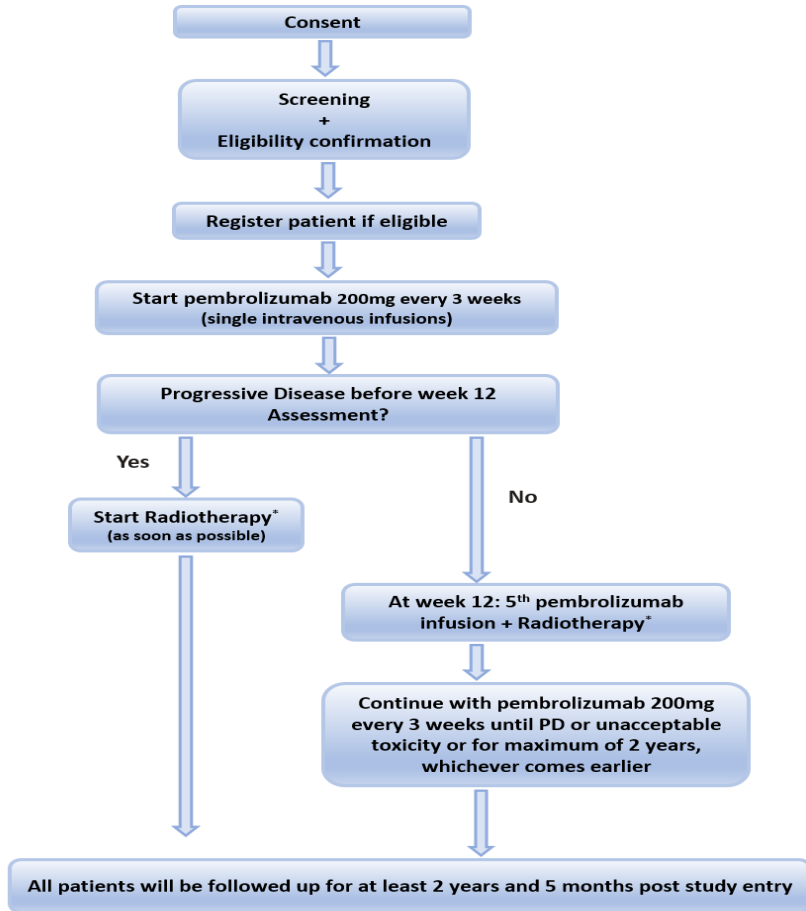
- Baseline PD-L1 expression
- Immune cell infiltration

### **Peripheral blood mononuclear cell phenotyping**

- Assessment of changes in the immune status of peripheral blood, in comparison to the intratumoural microenvironment, by analysis of mononuclear immune cell phenotypic markers by flow cytometry
- Analysis of plasma HMGB-1 isoform levels as a biomarker of immunogenic cell death following pembrolizumab and radiotherapy (RT)
- Functional analysis of isolated cell populations to determine any effect of pembrolizumab and RT on peripheral cell-mediated immune function
- DNA extraction for T cell receptor sequencing to assess diversity and clonality of T cell clones, in parallel with tissue for similar analysis
- RNA storage for evaluation of immune signatures for responders and non-responders
- Analysis of T cell reactivity against neo-antigens and other tumour associated antigens



# Phase II Trial of Pembrolizumab and Radiotherapy in Cutaneous T cell lymphoma



\* Radiotherapy will be given as 12Gy in 3#

### PRIMARY OBJECTIVES

- To determine whether the addition of radiotherapy to pembrolizumab results in improved response rates
- To investigate immune biomarkers of response to pembrolizumab in combination with radiotherapy

### PRIMARY ENDPOINTS

Global assessment of overall response of the combination of pembrolizumab plus radiotherapy at 24 weeks, after the commencement of pembrolizumab

### SECONDARY ENDPOINTS

- Response after 12 weeks of pembrolizumab
- Change (improvement) in response
- Duration of response
- Time to next treatment
- Abscopal effect (measured by regression of pre-defined lesions which have not been irradiated)
- Safety and toxicity
- Progression-Free & Overall Survival

### TARGET ACCRUAL / NUMBER OF SITES

- 46 Patients recruited over a period of 3 years, and would be followed up for at least 2 years and 5 months after study entry
- 12 identified sites to be open

### TRIAL STATUS

- Currently In-Set-Up
- Proposed Dates:
  - EC Submission: REC Provisional Favourable Opinion given
  - 1<sup>st</sup> Site open (proposed date): July 2018
- CRN Adopted
- Wales Research Directory adopted
- Fully funded
- HRA Outcome of Initial Assessment received
- ClinicalTrials.gov number – NCT03385226

#### CHIEF INVESTIGATOR

Professor Tim Illidge, Manchester Cancer Research Centre

#### CENTRAL LAB

Dr Eleanor Cheadle, Targeted Therapy Group, University of Manchester

#### PORT - HAEMATOLOGY TRIALS GROUP

CR UK & UCL CTC, 90 Tottenham Court Rd, London, W1T 4TJ

☎ 0207 679 9860 📠 0207 679 9861 ✉ [ctc.port@ucl.ac.uk](mailto:ctc.port@ucl.ac.uk)