465P - LAROTRACKING – Real-life study of locally advanced/metastatic solid tumor treated with larotrectinib in French expanded access program

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BACKGROUND

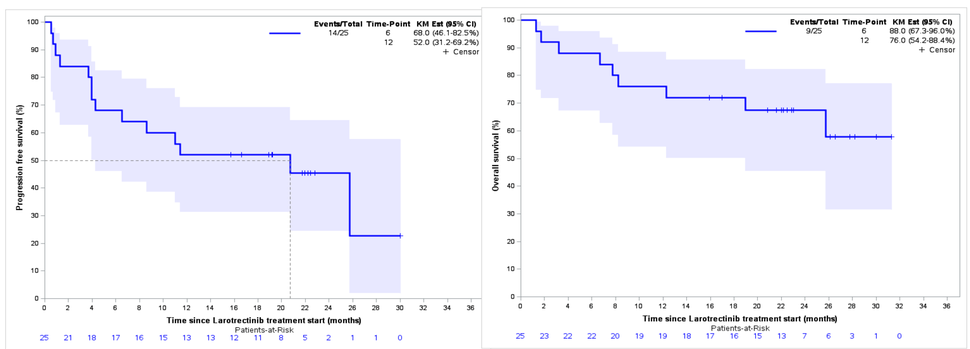
- Larotrectinib, highly selective TRK inhibitor: received tumor-agnostic approvals from FDA and EMA for treatment of locally advanced/metastatic TRK fusion tumors.
- Rarity and heterogeneity of concerned tumors make randomized trial difficult to consider: importance to get real-life data.

METHODS

- LAROTRACKING (NCT04814667) is a real-life registry for patients who initiated larotrectinib between April 2019 and October 2020 in French Authorization for Temporary Use cohort.
- Eligible patients were adult patients (> 25 years old) suffering from advanced/ metastatic solid tumors with *NTRK* gene.
- Study endpoints: best overall response rate (BORR), progression free and overall survival (PFS and OS) and safety.

RESULTS

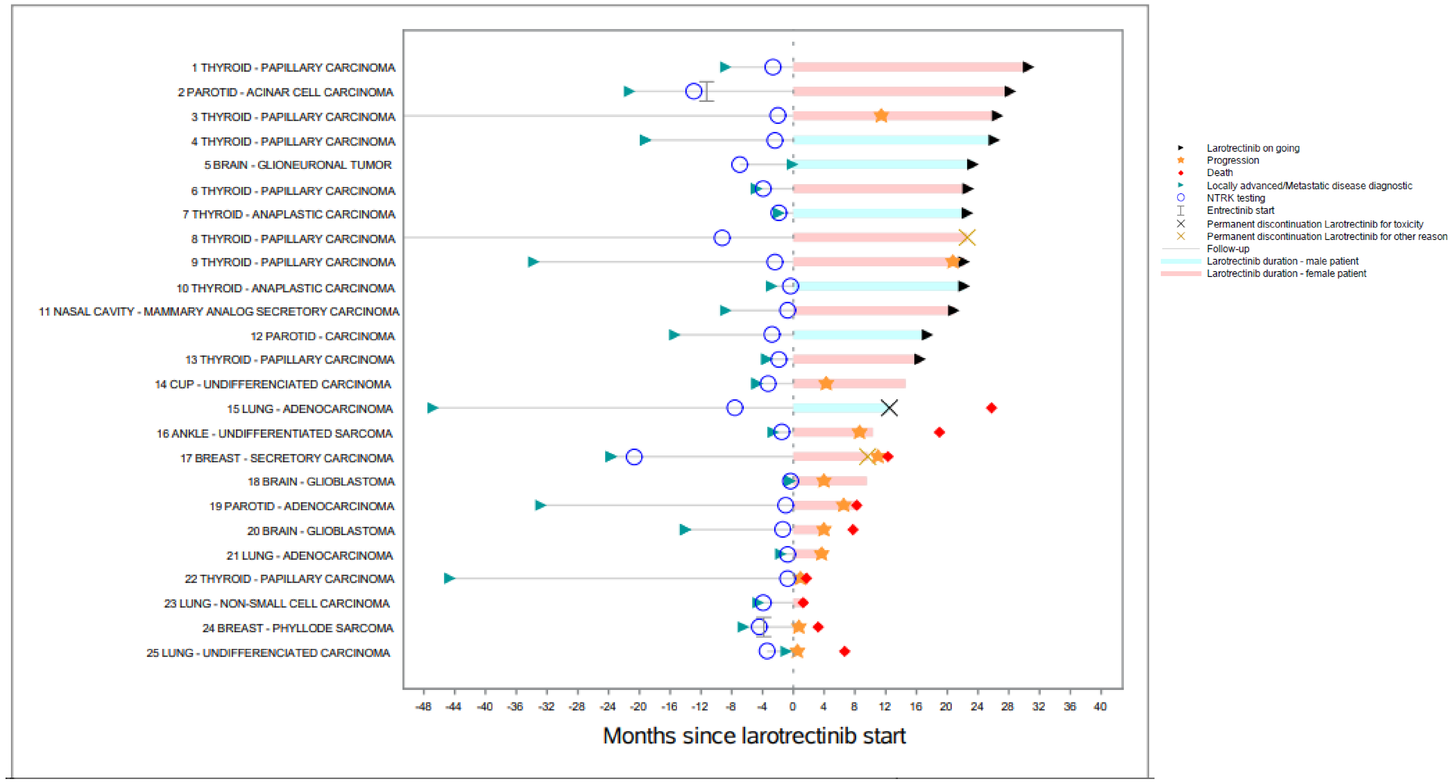
- 25 patients were enrolled across 15 institutions (median age at time of larotrectinib start 58.2 years [min-max : 30.8-78.0] ;17 women). Main primary tumor types: thyroid papillary carcinoma (n=8), lung carcinoma (n=4) and glioblastoma (n=2). Main *NTRK* fusions: *ETV6-NTRK3* (n=7) and *TPM3-NTRK1* (n=3). Median time between the diagnosis of advanced cancer and *NTRK* testing: 3.0 months [-6.8-280.5]. Median number of prior lines before larotrectinib : 1 [0-7].
- After median follow-up of 23.0 m (95% CI: 21.6-27.8), PFS and OS are presented below.



RESULTS

At time of this analysis:

- 13 pts had permanently discontinued larotrectinib. Median duration of larotrectinib treatment was 16.5 months [0.7-30.6] with disease progression as main reason for larotrectinib discontinuation (n=8/13). Other reasons for larotrectinib discontinuation were death (n=2/13), toxicity (n=1/13), other reason (n=2/13).
- BORR: 64% [95% CI: 42.5-82.0] with 3 CR and 13 PR.



CONCLUSION

These results confirm the high efficacy and tolerance of TRK inhibitor. They emphasize the heterogeneity and rarity of concerned patients and the need for collaborative cohorts to better characterize patients and diseases.

Acknowledgements : We would like to thank the patients and their families, all the study staff from participating centers. The Study was supported by Bayer. First author has no conflict of interest. : armelle.dufresne@lyon.unicancer.fr