INAVO121: A study of inavolisib + fulvestrant versus alpelisib + fulvestrant in patients with *PIK3CAmut*, HR+/HER2– LA/mBC in a post-CDK4/6i setting

Recruiting soon

INAVO 121/WO43919: A phase III, multicentre, randomised, open label study evaluating the efficacy and safety of inavolisib + fulvestrant vs. alpelisib + fulvestrant in patients with HR+/HER2–, *PIK3CA* mutated, LA/mBC who progressed during or after CDK4/6i and endocrine combination therapy

Patients with *PIK3CAmut*, HR+/HER2– LA/mBC
- Prior CDK4/6i therapy
- Postmenopausal or pre- or peri-menopausal women and men
- Measurable or evaluable disease
- ≤ 1L of chemo in mBC
- ECOG PS ≤ 2

N = 400

R 1:1

Inavolisib + fulvestrant | **Alpelisib + fulvestrant**

Treatment until PD or unacceptable toxicity

Long-term follow up

Stratification factors:
- Visceral disease (yes/no)
- Prior CDK4/6i therapy (adjuvant/metastatic)

Primary endpoint

- Blinded independent central review (BICR)-assessed progression free survival (PFS), defined as the time from randomisation to the first occurrence of disease progression (per RECIST v1.1) or death from any cause (whichever occurs first)

Secondary endpoints

- Overall survival
- Objective response rate (BICR)
- Best overall response (BICR)
- Clinical benefit rate (BICR)
- Duration of response (BICR)
- Safety and tolerability
- Patient-reported outcomes
- Pharmacokinetics

Key inclusion criteria

- Documented HR+/HER2- LA/mBC
- *PIK3CA* mutated disease confirmed by central ctDNA or prior local ctDNA or tumour tissue
- Postmenopausal women, pre- and peri- menopausal* women and men*
- Disease progression after or during CDK4/6i + ET:
  - ≤ 2 prior lines of systemic therapy in mBC setting
  - CDK4/6i-based therapy does not need to be the last one received prior to study entry
  - Each “line” defined as treatment given for a new relapse/progression
  - One line of chemotherapy in mBC setting allowed
- Measurable disease per RECIST v1.1 or evaluable disease (≥1 predominantly lytic bone lesion confirmed by CT/ MRI)
- ECOG 0–2
- Adequate haematological & organ function including:
  - Fasting glucose < 126 mg/dL/< 7.0 mmol/L and
  - HbA1c < 6.4%/< 46 mmol/mol

* Treated with LHRH agonist therapy

Key exclusion criteria

- Prior treatment with any agent whose mechanism of action is inhibiting the PI3K/AKT/mTOR-pathway
- Participant who relapsed with documented evidence of progression >12mo from completion of adjuvant CDK4/6i-based therapy with no treatment for metastatic disease
- Known and untreated, or active CNS metastases (exception: patients with treated CNS metastases that meet specific criteria)
- Type 2 diabetes requiring ongoing systemic treatment at the time of study entry; any history of Type 1 diabetes
- Any concurrent ocular or intraocular condition requiring medical or surgical intervention or active inflammatory or infectious conditions or history of idiopathic or autoimmune uveitis
- History of or active bowel inflammation (including IBD)
- Symptomatic active lung disease, including pneumonitis
- Chronic corticosteroid therapy of ≥10 mg of prednisone
- History of severe cutaneous reactions
- Active ongoing osteonecrosis of the jaw

For more information about enrolment to this trial, and which sites are participating, please contact global-roche-genentech-trials@gene.com

Link for more information | Available on CT.gov soon

Please reach out to your local Roche/Genentech contact for more information

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