

A phase 2 multicenter study to evaluate the efficacy of tilsotolimod in combination with nivolumab and ipilimumab for treatment of microsatellite-stable colorectal cancer (ILLUMINATE-206)

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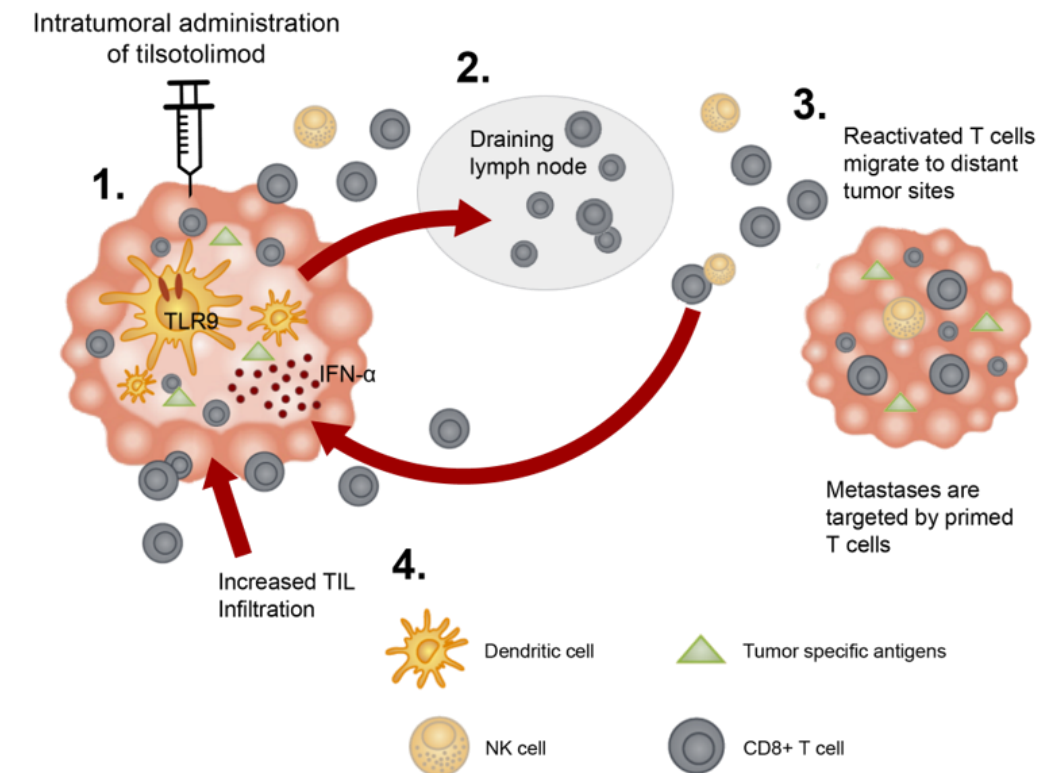
Disclosures:

H.M. Babiker: Bayer, Celgene, Endocyte, Guardant360, SIRTex, Tracon. **H.J. Lenz:** None. **A.J. Scott:** Exelixis, QED, Merck and Co, Incyte. **S.**

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Background

- Nivolumab, administered as monotherapy or in combination with ipilimumab, has demonstrated benefit for several solid tumor types, including previously treated mismatch repair deficient (dMMR)/microsatellite-instability high (MSI-H) metastatic colorectal cancer (mCRC)¹
- Microsatellite-stable (MSS) CRC is highly immunosuppressive and typically unresponsive to checkpoint inhibitors or other immunotherapies²⁻⁴
- Tilsotolimod is an investigational Toll-like receptor 9 (TLR9) agonist with immunostimulatory activity⁵
- In a phase 1 study in patients with advanced solid tumors (ILLUMINATE-101, NCT03052205), monotherapy with intratumoral tilsotolimod has demonstrated dendritic cell activation and increased numbers of tumor-infiltrating lymphocytes⁶
- In a phase 1/2 study of intratumoral tilsotolimod plus ipilimumab in anti-PD-(L)1-refractory advanced melanoma, durable responses in injected and noninjected lesions were observed⁷



1. Overman MJ, et al. *J. Clin. Oncol.* 2018;36(8):773-779. 2. Overman MJ, et al. *Ann. Oncol.* 2016;34(15 [suppl]):3501. 3. Le DT, et al. *N. Engl. J. Med.* 2015;372:2509-2520. 4. Boland, PM and Ma, WW. *Cancers.* 2017;9(5):E50. 5. Wang D, et al. *Int. J. Oncol.* 2018;53:1193-1203. 6. Babiker, HM et al. AACR Annual Meeting. 2020. 7. Diab A, et al. ESMO Annual Meeting. 2020:1245PD.

ILLUMINATE-206 (NCT03865082) Trial

A study of intratumoral tilsotolimod in combination with nivolumab and ipilimumab for the treatment of solid tumors

Immunotherapy-naïve MSS-CRC cohort

Inclusion Criteria:	Exclusion Criteria:
Histologically confirmed advanced, metastatic, or progressive MSS or pMMR CRC	Prior treatment with agents directed at PD-1, PD-L1/2, or another stimulatory or co-inhibitory T cell receptor
Received at least 2 prior regimens of therapy for advanced or metastatic CRC including fluoropyrimidine-, oxaliplatin-, and irinotecan-based regimens	BRAF V600E mutation
Documentation of radiologic progression by Response Evaluation Criteria in Solid Tumors (RECIST) v1.1 during or after previous chemotherapy	History of immune-mediated colitis

CRC, colorectal cancer; MSS, microsatellite stable; pMMR, mismatch repair proficient.

For more information on this study, visit <https://clinicaltrials.gov/ct2/show/NCT03865082>

ILLUMINATE-206 Endpoints and Status

Study Endpoints

Efficacy based on overall response rate and duration of response per RECIST v1.1

Safety and tolerability

Exploratory: Paired blood or biopsy samples may be evaluated for tumor genetics, immune infiltrates, and gene expression

Current status

- 10 patients have been enrolled in an MSS-CRC safety cohort, with data expected in H2 2020

Thank you to the patients, investigators, and staff involved in this study

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