Summary of Results for Laypersons

Astellas is grateful to the patients who took part in this clinical study. Thank you.

What was the Study Called?

A Phase 1 Study Evaluating Safety, Tolerability, and Pharmacokinetics of Escalating Doses of AGS67E Given as Monotherapy in Subjects with Acute Myeloid Leukemia (AML)

Why was this Study Needed?

Acute myeloid leukemia (AML) is a type of cancer when bone marrow makes white blood cells that are not normal. These are called leukemia cells. Relapsed AML means the cancer came back after it had disappeared with prior therapy. Refractory AML means the cancer did not go away with a prior treatment. AGS67E-15-2 is a new intravenous (IV) experimental medicine for AML.

This study was conducted in patients with AML whose cancer disappeared after prior treatment but then came back after that treatment stopped. Or whose cancer did not respond to prior treatment. Or they had been unwilling or unable to receive other therapy. The questions this study asked were whether AGS67E is safe and how well patients with AML tolerate it. And it asked what would be a safe dose of AGS67E-15-2 for future studies.

The study started in March 2016. The sponsor (Astellas) stopped the study in November 2017. The study was stopped earlier than planned for business reasons that were not related to the study medicine. At the time the study was stopped, 23 patients had taken AGS67E. Astellas reviewed all the study information and created a report of the results. This is a summary of that report.

What Kind of Study was This and Who Took Part in it?

This was an "open-label" study. This means that each patient and the study doctors knew the patient took AGS67E.

This study included women and men 18 years and older who had been diagnosed with AML. Their AML was relapsed (came back after it had disappeared with prior therapy). Or it was refractory (did not go away with prior therapy). Or the patient had been unwilling or unable to receive other therapy. They were active or they could perform light daily activities. Or they were able to walk and capable of all self-care, but unable to carry out any work activities. And they were up and about more than half of the time that they were awake. Patients were not included if they had received certain other treatments or therapies within 2 weeks of the first dose of AGS67E.

During the study, the study doctor did a check-up of the patients at several study visits. At the first visit, patients were checked to see if they could be in the study. Patients who could be in the study were assigned to 1 of 2 dosing schedules (schedule A or schedule B). The AGS67E dose could be increased if a given dose in 3 patients did not cause unwanted effects not tolerated by patients.

- Schedule A: AGS67E was given as an IV infusion once every 3 weeks. A cycle was 21 days. The starting dose was 1.2 mg of medicine for every kg of patient body weight (mg/kg). The dose could be increased to 3.0 mg/kg.
- Schedule B: AGS67E was given as an IV once every week for 3 weeks followed by 1 week without receiving any treatment. A cycle was 28 days. The starting dose was based on results seen during dosing schedule A.

Patients could take AGS67E for 4 cycles or 1 additional cycle after the patient showed some improvement in their cancer, whichever was longer. Patients could stop treatment if their cancer got worse, they had unwanted effects they could not tolerate or they asked to stop treatment. Or the study doctor decided that continuing treatment was no longer in the patients' best interest.

This study took place at 4 clinics in the US and 1 clinic in Canada. Out of these 24 patients, 23 patients took at least 1 dose of study medicine.

	Number of Patients		
	Schedule A (n = 14)	**Schedule B (n = 9)**	**Overall (n = 23)**
Age Group			
Aged less than 65 years	7	6	13
Aged 65 years or older	6	1	7
Aged 75 years or older	1	2	3
Sex			
Men	8	3	11
Women	6	6	12
Clinic Location			
European Union Countries (*at the time of the study*)	0	0	0
Outside European Union			
Canada	4	1	5
The US	10	8	18

What Were the Study Results?

The questions this study asked were whether AGS67E is safe and how well patients with AML tolerate it. To do this, the study looked at the medical problems (called "adverse events") patients had. Patients took AGS67E in this study for a median (middle value in a sorted list of numbers) of 4.6 weeks.

A lot of research is needed to know whether a medicine causes a medical problem. So when new medicines are being studied researchers keep track of all medical problems that patients have while they are in the study. These medical problems are called "adverse events" and are recorded whether or not they might be caused by the treatment taken.

The table below shows the most common adverse events in patients who took at least 1 dose of AGS67E.

Adverse Event	Schedule A (out of 14 patients)	Schedule B (out of 9 patients)	Overall (out of 23 patients)
Any adverse event	14 (100%)	9 (100%)	23 (100%
fever	6 (42.9%)	5 (55.6%)	11 (47.8%)
fever associated with dangerously low levels of a type of white blood cell (neutrophils)	5 (35.7%)	6 (66.7%)	11 (47.8%)

Study results showed that AGS67E has acceptable safety in patients with AML, in this study.

This study also asked the question about the safe dose of AGS67E for future studies. The study ended early so there were not enough patients to answer that question.

What Adverse Reactions did Patients Have?

An "adverse reaction" is any medical problem or "adverse event" that is judged by the study doctor to be possibly caused by a medicine or treatment used in the study.

The table below shows the most common adverse reactions in patients who took at least 1 dose of AGS67E in this study.

Adverse Reaction	Schedule A (out of 14 patients)	Schedule B (out of 9 patients)	Overall (out of 23 patients)
Any adverse reaction	11 (78.6%)	4 (44.4%)	15 (65.2%)
Low white blood cell count	4 (28.6%)	0	4 (17.4%)
Reduction in blood platelets, which increases risk of bleeding or bruising	2 (14.3%)	2 (22.2%)	4 (17.4%)

An adverse reaction is considered "serious" when it is life-threatening, causes lasting problems or needs hospital care.

One patient (4.3%, or 1 out of 23 patients) experienced serious adverse reactions in this study. The patient was in Schedule B.

Six patients died during the study: 3 patients in schedule A and 3 patients in schedule B. None of the patients died because of the AGS67E.

Where Can I Learn More About This Study?

This document is a short summary of the main results from this study and reflects the information available as of June 2019. You can find this summary and more information about this study online at http://www.astellasclinicalstudyresults.com.

Please remember that researchers look at the results of many studies to find out how well medicines work and which adverse reactions they might cause. This summary only shows the results of this 1 study. Your doctor may help you understand more about the results of this study.

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