CONCLUSIONS

- Phase 1b cohort data defined the recommended phase 2 starting dose as lucitanib 6 mg orally once daily and nivolumab 460 mg intravenously every 28 days.
- Data suggest that the combination of lucitanib + nivolumab has promising antitumor activity (47.1% disease control rate) with a manageable safety profile across multiple tumor types.
- The phase 2 study is ongoing; from the initial 24 patients enrolled into stage 1 of the phase 2 ovarian cancer (OC) cohort, 10 patients have completed ≥1 cycle, 9 escalated to the 8-mg lucitanib dose. Of these, 3 patients reported a TEAE leading to discontinuation of study treatment (hypertension and angina pectoris).
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A key secondary endpoint was disease control rate defined as confirmed complete response (CR) or partial response (PR). No treatment-related adverse events grade >2 occurred in >1 patient. The overall disease control rate was 47.1%.

RESULTS

Phase 1b

- 20 patients were treated with low lucitanib (6 mg QD) and nivolumab 460 mg every 28 days.
- Median time on lucitanib was 27.3 (range 1–396) days. 16 patients (80%) had Eastern Cooperative Oncology Group performance status (ECOG PS) 0/1.
- efficacy.
- Overall disease control rate was 47.1%.

Phase 2 OC Cohort

- 20 patients were treated with low lucitanib (6 mg QD) and nivolumab 460 mg every 28 days.
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