MOR202 with low-dose dexamethasone (Dex) and in combination with pomalidomide/Dex and lenalidomide/Dex in relapsed or refractory multiple myeloma (RRMM): interim analysis of a phase I/IIa dose-escalation study

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MOR202, a fully human IgG4 monoclonal antibody that targets CD20, is currently in phase I/II clinical trials (NCT01421186)9. The antibody is currently being evaluated both as monotherapy and in combination with low-dose dexamethasone (Dex) and in combination with pomalidomide/Dex and lenalidomide/Dex in relapsed or refractory multiple myeloma (RRMM)10.

**Objective**

- Assess the safety profile and establish the maximum tolerated dose (MTD) and/or recommended dose of MOR202 in patients with RRMM

**Methods**

- Phase I/IIa, open-label, multicenter, dose-escalation study in patients with RRMM
- Study design: Standard 3+3 dose-escalation study starting with MOR202 monotherapy at 0.01 mg/kg every two weeks (q2w) up to 16 mg/kg every week (q1w)
- Patients were/will be treated until progressive disease or a maximum of 2 years

**Results**

- The study is ongoing; this is an interim report of safety, and preliminary efficacy data in the MOR202 combination cohorts.
- As of April 17, 2017, a total of 81 patients had been treated with MOR202 including 48 patients treated in combination with Dex only or with an IMiD in clinically relevant doses (11 cohorts)11.

**Conclusions**

- MOR202 in combination with Pom (4 mg po, d1-21)/Dex† demonstrated high in vitro and in vivo efficacy in preclinical models of MM.
- A 2-hour IV infusion was feasible in all patients.
- AEs, adverse events; CTCAE, common terminology criteria for adverse events; Dex, dexamethasone; IMiD, immunomodulatory drug; LEN, lenalidomide; POM, pomalidomide; q1w, weekly; S, serum; U, urine.

**References**

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**Disclosures**

Hypokalemia
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Neutropenia

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