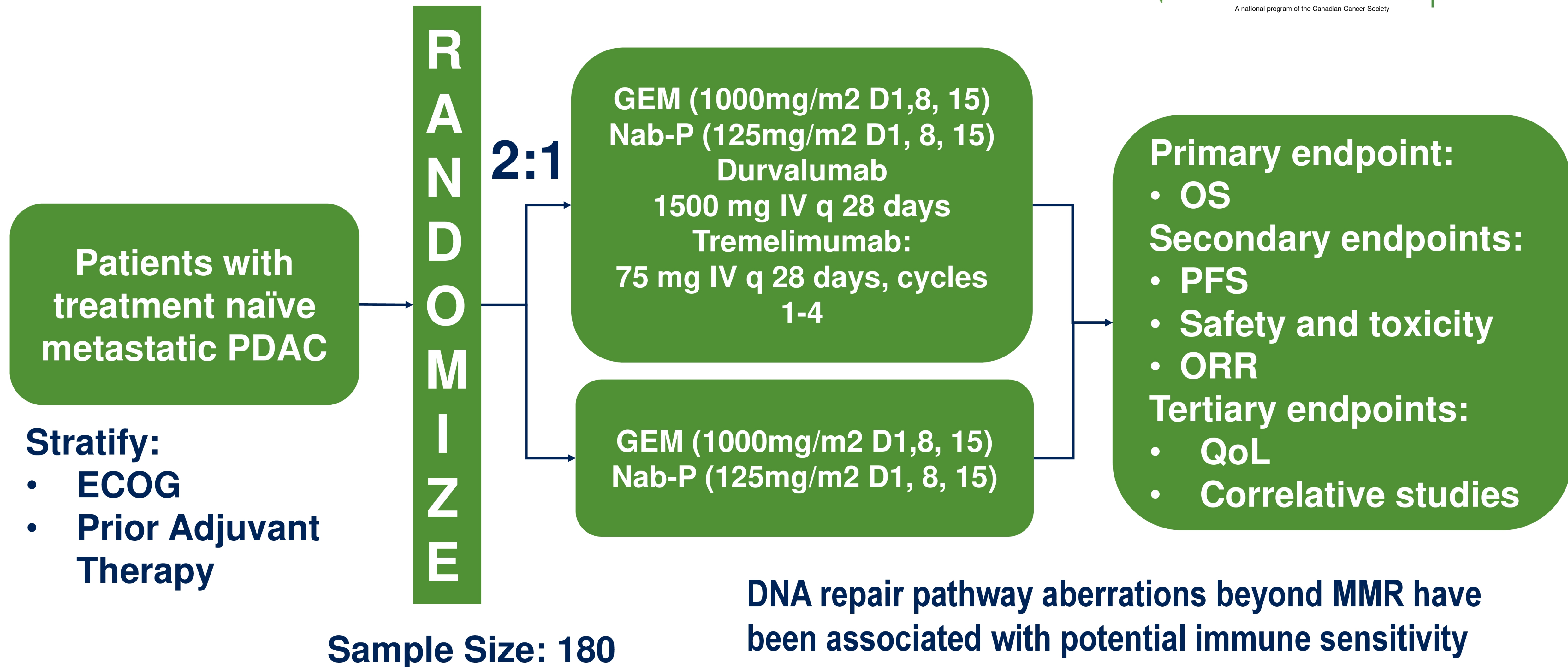


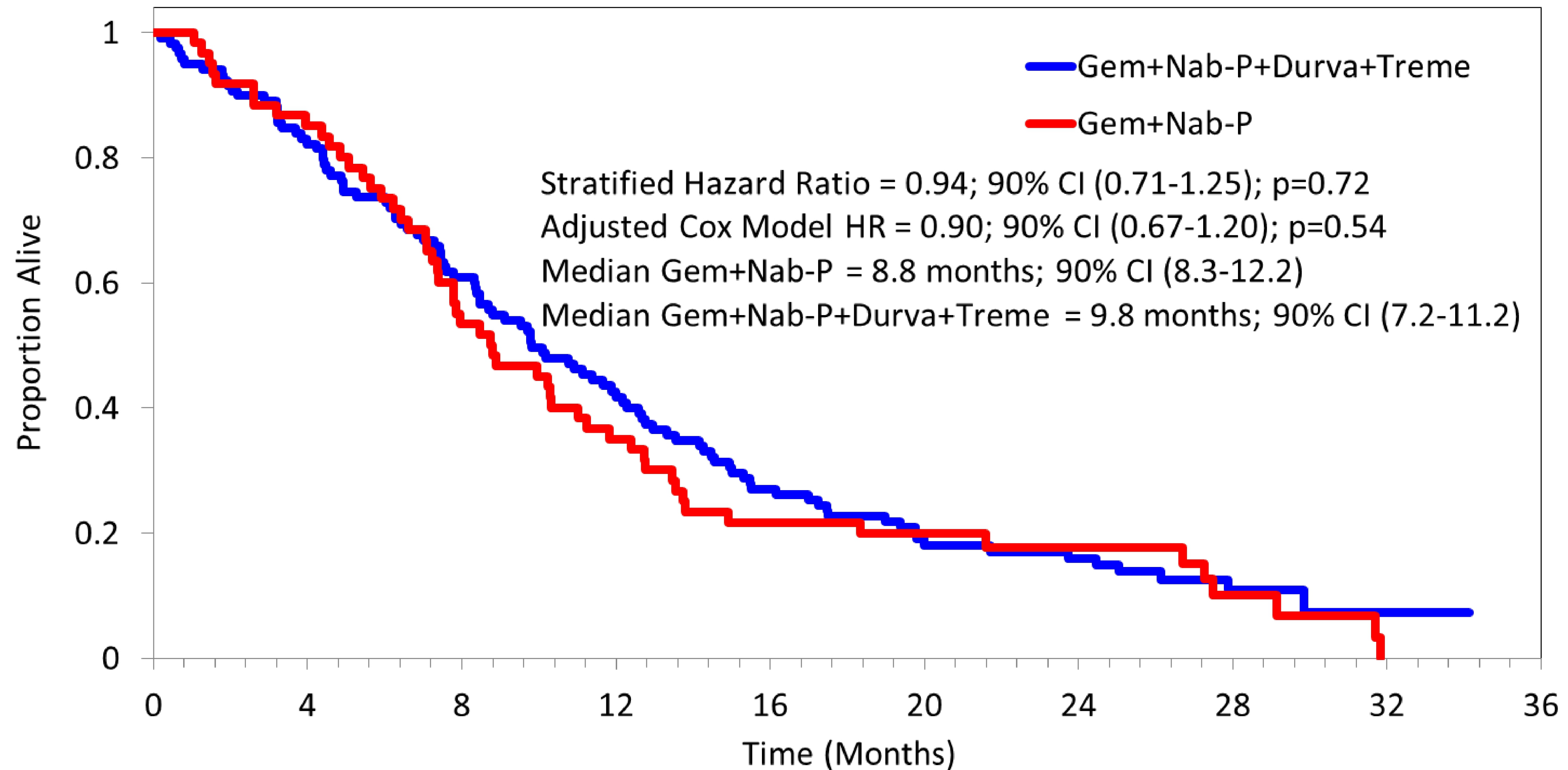
PREDICTIVE VALUE OF PLASMA ATM IN THE CCTG PA.7 TRIAL: GEMCITABINE (GEM) AND NAB-PACLITAXEL (NAB-P) VS. GEM, NAB-P, DURVALUMAB (D) AND TREMELIMUMAB (T) AS FIRST LINE THERAPY IN METASTATIC PANCREATIC DUCTAL ADENOCARCINOMA (MPDAC)

Renouf D, Loree J, Knox J, Kavan P, Jonker D, Welch S, Couture F, Lemay F, Tehfe M, Harb M, Aucoin N, Ko Y, Tang P, Topham J, Jia S, Du P, Schaeffer D, Gill S, Tu D, O'Callaghan C

CCTG PA.7 Study Schema:



Results: Overall Survival



G+N+D+T: 119	97	71	48	31	20	15	7	1	0
G+N: 61	51	32	21	13	11	7	4	0	0

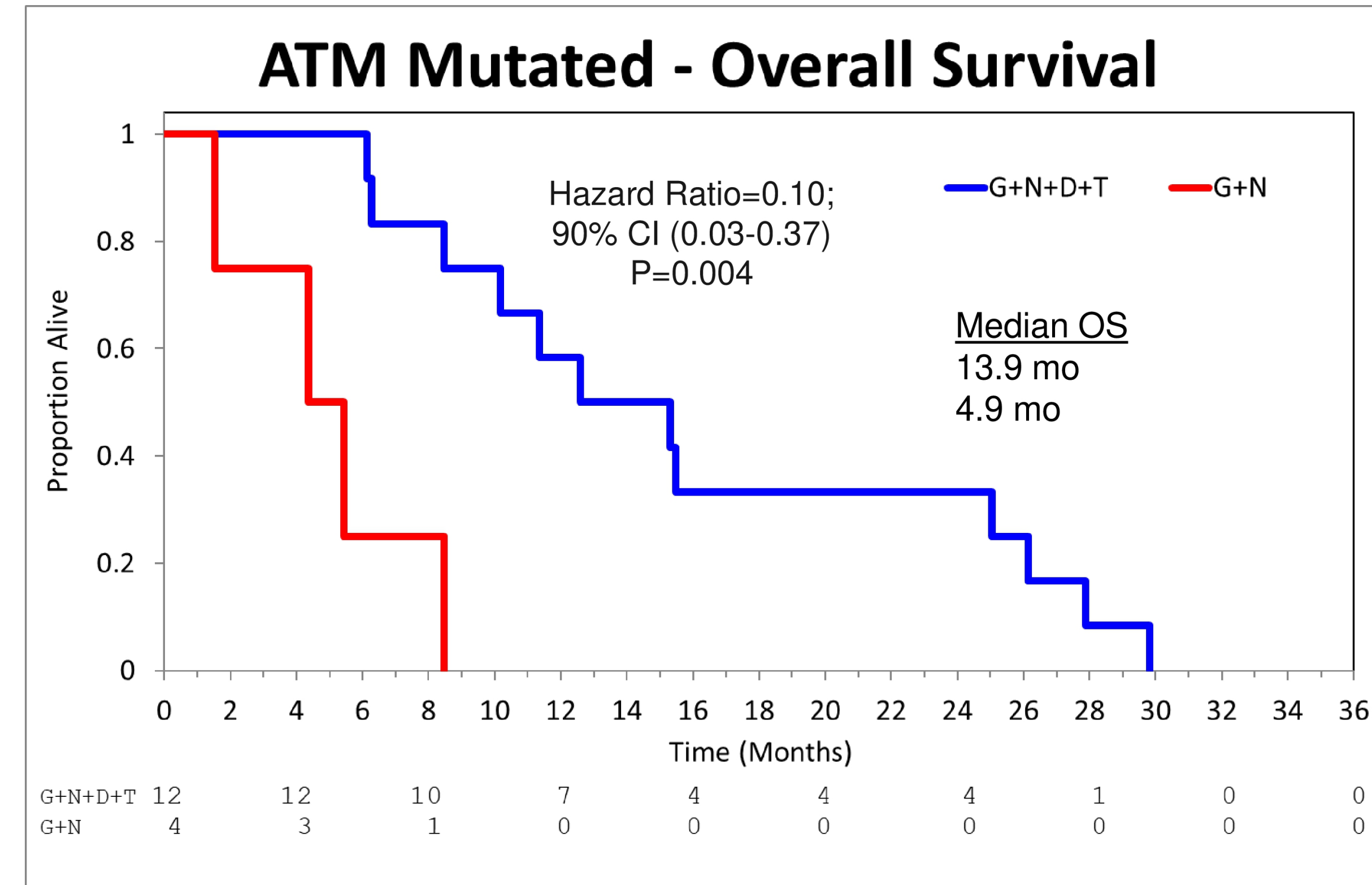
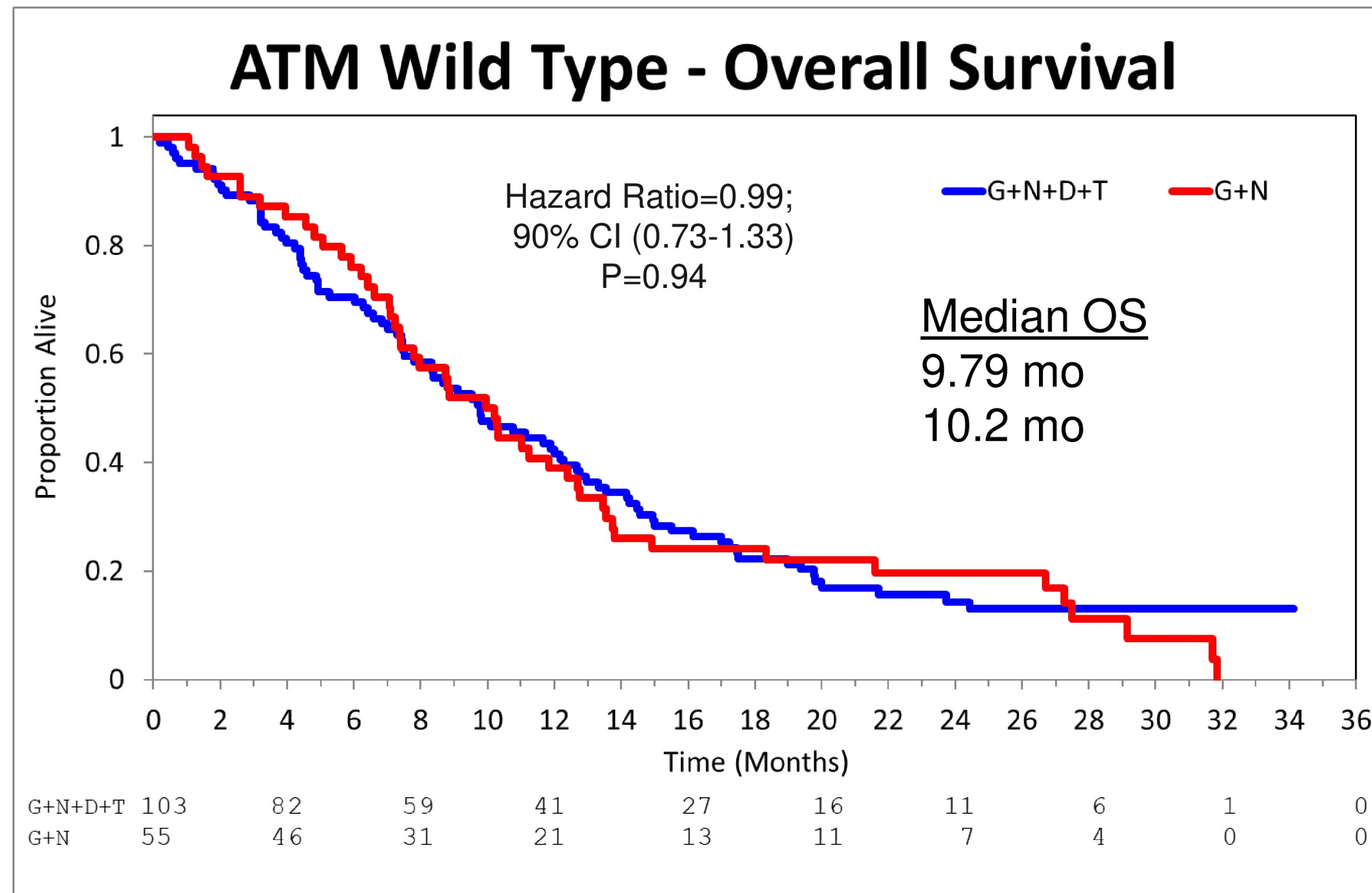
Correlative Analysis

- **cfDNA analysis performed on pre-treatment plasma samples**
- Sequenced with PredicineATLAS™ NGS Assay
 - 600-gene, 2.4 Mb panel
- **Plasma DNA repair analysis was performed on 174/180 patients with available samples**
- Tumor derived variants detected in 173/174 patients (99.4%)
- 172 patients were MSS and 1 was MSI-H

Results: *ATM* mutations appeared predictive of benefit in the immunotherapy arm

Overall Survival in Patients with germline *ATM* Wild Type (158/174 (90.8 %))

Overall Survival in Patients with germline *ATM* mutations (16/174 (9.2%))



P-interaction = 0.014 (significant at pre-specified p=0.1)

Conclusions:

- The addition of durvalumab and tremelimumab to gemcitabine and nab-paclitaxel did not result in a significant improvement in OS, PFS or ORR
- Plasma cfDNA analysis was successful in over 99% of patients with available samples
- Plasma germline *ATM* mutations may predict benefit from the addition of dual immune checkpoint inhibitors (D and T) to Gem and Nab-P
- This data supports that there may be groups beyond dMMR that should be investigated further for benefit of immunotherapy in PDAC