

# Nab-paclitaxel plus gemcitabine versus modified FOLFIRINOX or S-IROX in metastatic or recurrent pancreatic cancer (JCOG1611, GENERATE)

: a multicenter, randomized, open-label, three-arm, phase 2/3 trial

**Akihiro Ohba**<sup>1</sup>, Masato Ozaka<sup>2</sup>, Gakuto Ogawa<sup>1</sup>, Takuji Okusaka<sup>1</sup>, Satoshi Kobayashi<sup>3</sup>, Taro Yamashita<sup>4</sup>, Masafumi Ikeda<sup>5</sup>, Ichiro Yasuda<sup>6</sup>, Kazuya Sugimori<sup>7</sup>, Naoki Sasahira<sup>2</sup>, Kenji Ikezawa<sup>8</sup>, Ikuya Miki<sup>9</sup>, Naohiro Okano<sup>10</sup>, Nobumasa Mizuno<sup>11</sup>, Masayuki Furukawa<sup>12</sup>, Hirofumi Shirakawa<sup>13</sup>, Yusuke Sano<sup>1</sup>, Hiroshi Katayama<sup>1</sup>, Junji Furuse<sup>3</sup>, Makoto Ueno<sup>3</sup>

<sup>1</sup>National Cancer Center Hospital, Tokyo; <sup>2</sup>Cancer Institute Hospital of Japanese Foundation for Cancer Research, Tokyo; <sup>3</sup>Kanagawa Cancer Center, Yokohama; <sup>4</sup>Kanazawa University, Kanazawa; <sup>5</sup>National Cancer Center Hospital East, Kashiwa; <sup>6</sup>University of Toyama, Toyama; <sup>7</sup>Yokohama City University Medical Center, Yokohama; <sup>8</sup>Osaka International Cancer Institute, Osaka; <sup>9</sup>Hyogo Cancer Center, Hyogo; <sup>10</sup>Kyorin University, Tokyo; <sup>11</sup>Aichi Cancer Center Hospital, Nagoya; <sup>12</sup>Kyushu Cancer Center, Fukuoka; <sup>13</sup>Tochigi Cancer Center, Utsunomiya.

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# DECLARATION OF INTERESTS

Akihiro Ohba

Invited Speaker (Personal): Yakult, Ono, Servier, Taiho, Eisai

Advisory Board (Personal): Zymeworks

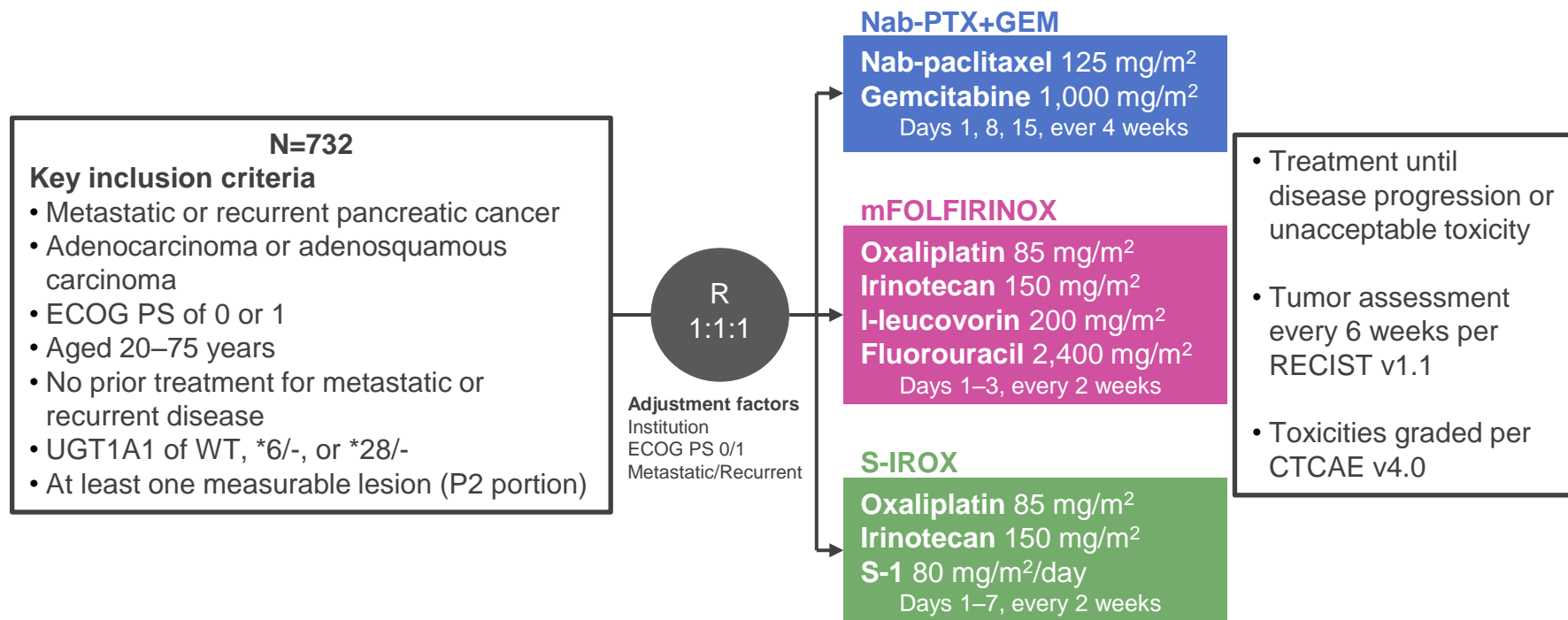
Local PI (Institutional): Ono, Chugai, Novartis

# Background

- Nab-paclitaxel plus gemcitabine and FOLFIRINOX (including modified regimens) are recommended as first-line treatments for metastatic pancreatic cancer in patients with good performance status<sup>1,2</sup>.
- Although NALIRIFOX demonstrated superiority over nab-paclitaxel plus gemcitabine recently<sup>3</sup>, there is no direct comparison between nab-paclitaxel plus gemcitabine and modified FOLFIRINOX.
- S-IROX (S-1, irinotecan, and oxaliplatin) showed promising activity (ORR of 51.1%) in a phase 1b trial in advanced pancreatic cancer<sup>4</sup>.
- Therefore, we aimed to compare the efficacy and safety of these three regimens in a phase 2/3 trial.

<sup>1</sup>New Engl J Medicine. 2011;364(19):1817–25. <sup>2</sup>New Engl J Medicine. 2013;369(18):1691–703. <sup>3</sup>J Clin Oncol. 2023;41(4\_suppl):LBA661. <sup>4</sup>Eur J Cancer. 2022;174:40–7.

# JCOG1611 (GENERATE): Trial Design



# Endpoints and Statistical Considerations

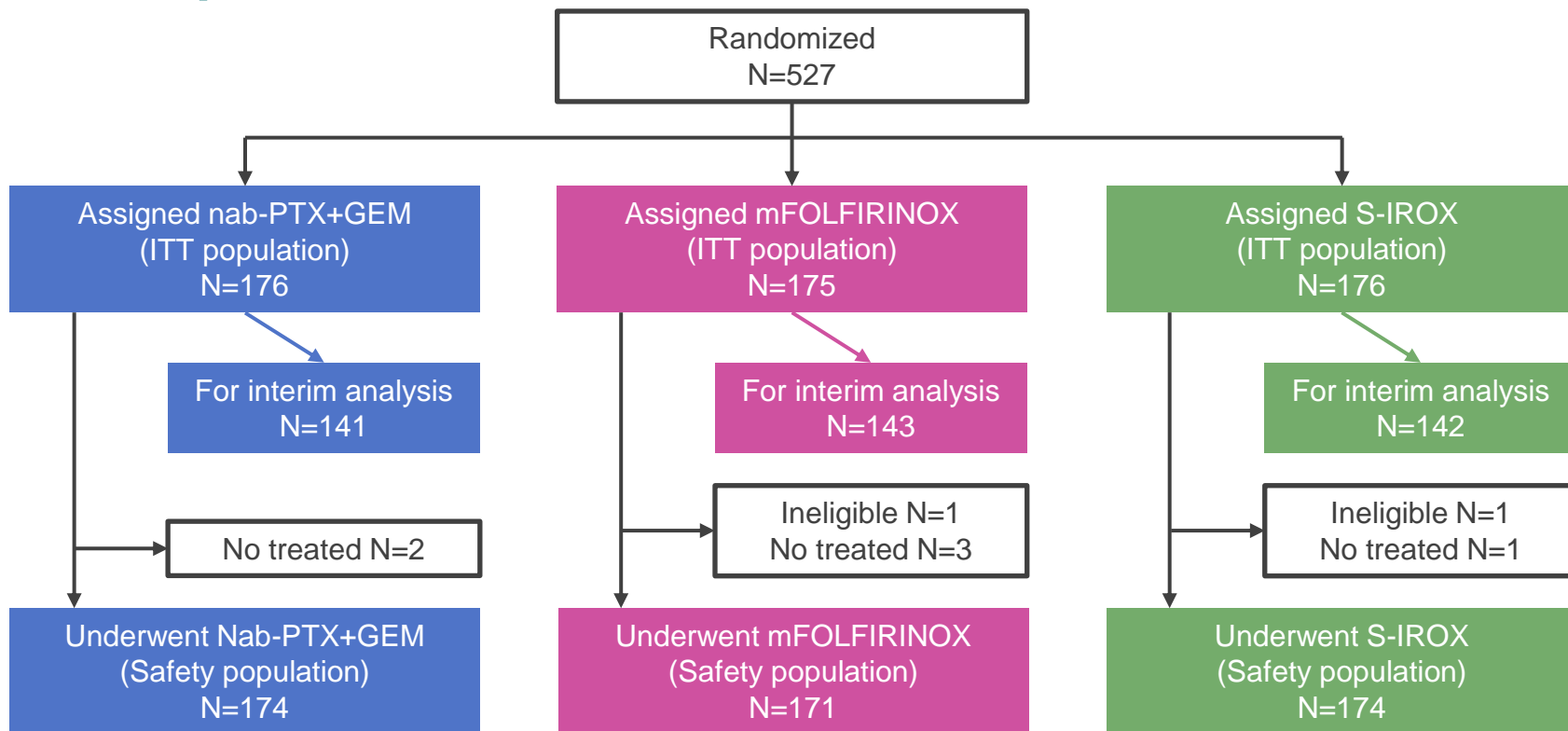
- **Phase 2 portion**

- Primary endpoint: ORR of S-IROX arm
- Planned N=45; 90% power with a one-sided alpha of 10%; threshold ORR 20%, expected ORR 40%.
- This was met in June 2020, and the phase 3 portion continued as a three-arm trial.

- **Phase 3 portion**

- Primary endpoint: OS
- Planned N=732; assumed MST as 11 months in nab-PTX+GEM and 15 months in mFOLFIRINOX and S-IROX (HR=0.73); 80% power with a one-sided alpha of 1.25% for each.
- Secondary endpoints: PFS, ORR, AEs, serious AEs, dose intensity
- One interim analysis after 50% of patients were enrolled was preplanned to determine whether continuing patient enrollment was reasonable.
- This was done in March 2023, and the trial was terminated early.

# Trial Population



# Patient disposition

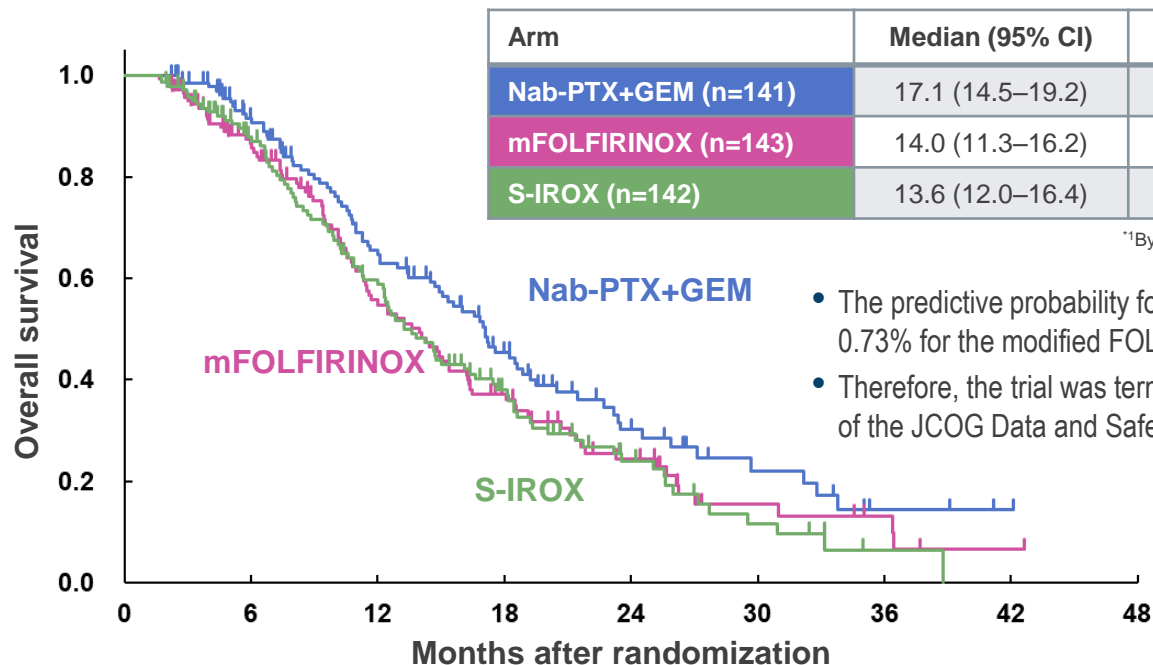
	Nab-PTX+GEM (n=176)	mFOLFIRINOX (n=175)	S-IROX (n=176)
Primary reason for protocol treatment discontinuation, n (%)			
Progressive disease	92 (52.3)	85 (48.6)	84 (47.7)
Adverse event	42 (23.9)	60 (34.3)	52 (29.5)
Death	1 (0.6)	0 (0)	2 (1.1)
Patient's decision	2 (1.1)	2 (1.1)	2 (1.1)
Due to early trial termination	33 (18.8)	25 (14.3)	32 (18.2)
Other	6 (3.4)	3 (1.7)	4 (2.3)

# Patient Baseline Characteristics

	Nab-PTX+GEM (N=176)	mFOLFIRINOX (N=175)	S-IROX (N=176)
Median age (range), years	65 (38–75)	67 (45–75)	65 (35–75)
Sex, female, n (%)	89 (50.6)	71 (40.6)	64 (36.4)
ECOG PS 0, n (%)	118 (67.0)	118 (67.4)	119 (67.6)
Pathology, n (%)			
Adenocarcinoma	171 (97.2)	171 (97.7)	173 (98.3)
Adenosquamous Ca	5 (2.8)	4 (2.3)	3 (1.7)
Disease status, n (%)			
Metastatic	165 (93.8)	167 (95.4)	167 (94.9)
Recurrent	11 (6.3)	8 (4.6)	9 (5.1)
Number of metastatic sites, n (%)			
1	116 (65.9)	103 (58.9)	109 (61.9)
2	44 (25.0)	51 (29.1)	50 (28.4)
≥3	16 (9.1)	21 (12.0)	17 (9.7)
Liver metastasis, n (%)	117 (66.5)	124 (70.9)	124 (70.5)
Pancreatic tumor location, n (%)			
Head	68 (38.6)	68 (38.9)	70 (39.8)
Body/Tail	108 (61.4)	107 (61.1)	106 (60.2)
CA 19-9, n (%)			
<37 U/mL	33 (18.8)	39 (22.3)	28 (15.9)
≥37 U/mL	143 (81.2)	136 (77.7)	148 (84.1)



# Overall Survival (Interim Analysis: Mar 2023)



Arm	Median (95% CI)	HR (95% CI) <sup>*1</sup>	One-sided p <sup>*2</sup>
Nab-PTX+GEM (n=141)	17.1 (14.5–19.2)	–	
mFOLFIRINOX (n=143)	14.0 (11.3–16.2)	1.31 (0.97–1.77)	0.9622
S-IROX (n=142)	13.6 (12.0–16.4)	1.35 (1.00–1.82)	0.9769

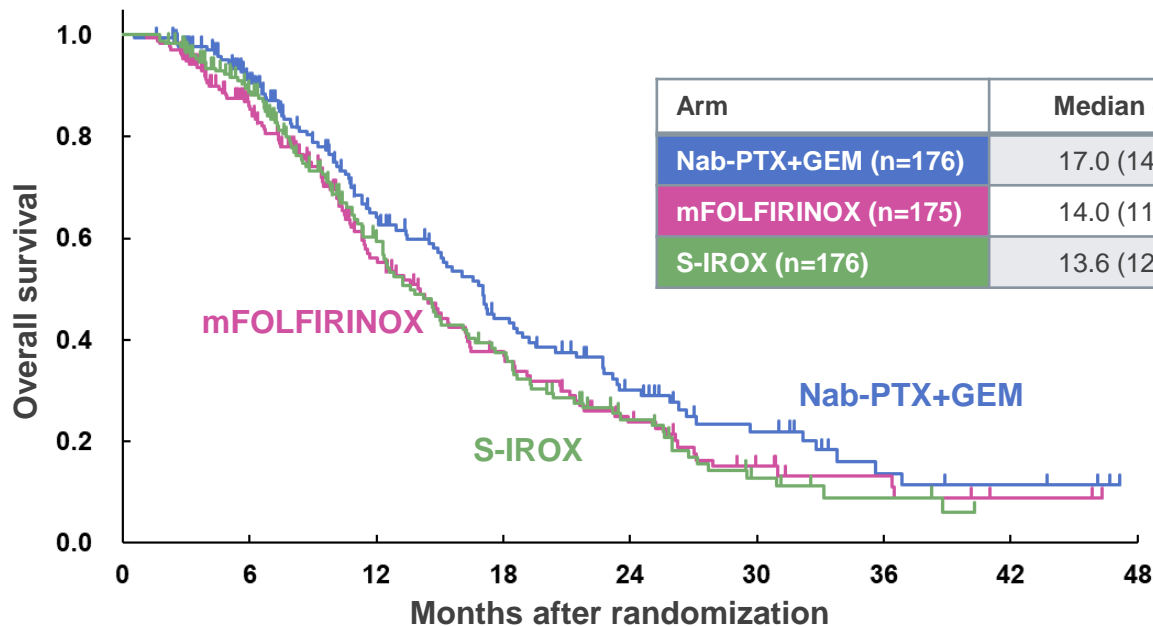
<sup>\*1</sup>By stratified Cox regression model, <sup>\*2</sup>By stratified log-rank test

- The predictive probability for achieving superiority at the final analysis was 0.73% for the modified FOLFIRINOX arm and 0.48% for the S-IROX arm.
- Therefore, the trial was terminated for futility based on the recommendation of the JCOG Data and Safety Monitoring Committee.

Patients at risk

	0	6	12	18	24	30	36	42	48
Nab-PTX+GEM	141	110	73	44	20	9	3	1	0
mFOLFIRINOX	143	104	60	35	18	7	4	1	0
S-IROX	142	104	67	35	16	6	1	0	

# Overall Survival (Updated: May 2023)



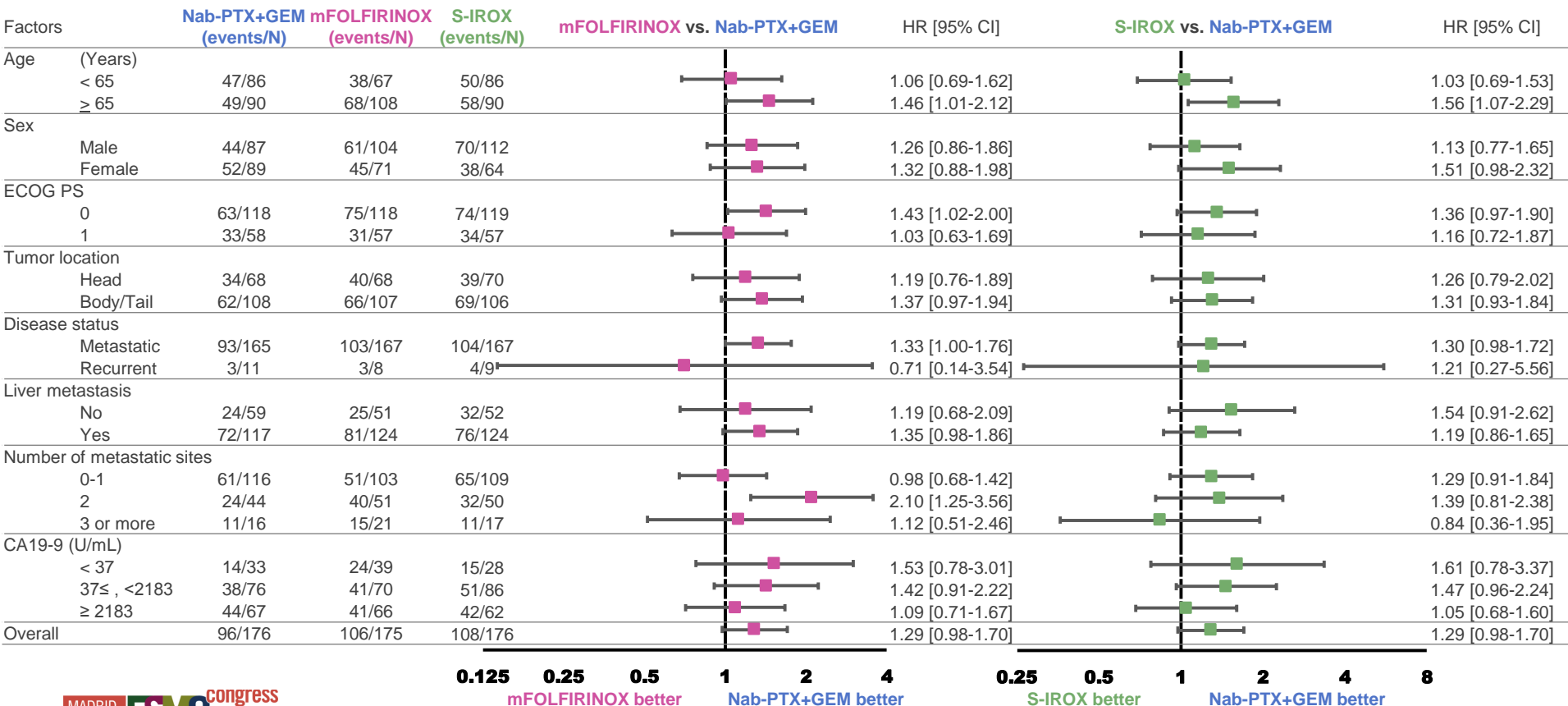
Arm	Median (95% CI)	HR (95% CI)*
Nab-PTX+GEM (n=176)	17.0 (14.5–18.9)	–
mFOLFIRINOX (n=175)	14.0 (11.4–16.3)	1.29 (0.98–1.70)
S-IROX (n=176)	13.6 (12.3–16.3)	1.29 (0.98–1.70)

\* By stratified Cox regression model

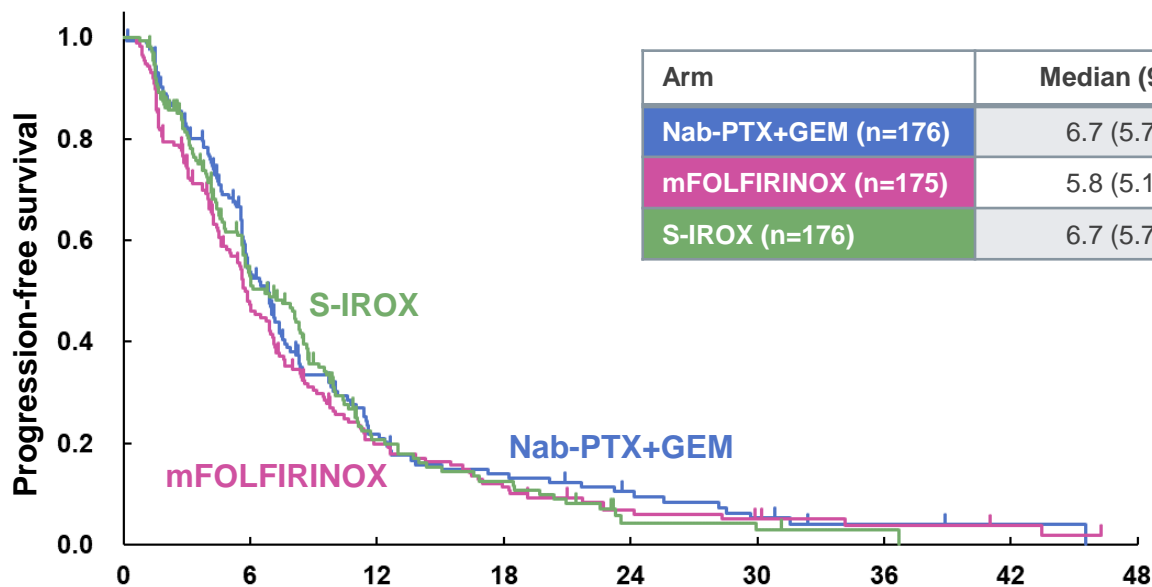
Patients at risk

	0	6	12	18	24	30	36	42	48
<b>Nab-PTX+GEM</b>	176	135	76	47	27	15	6	4	0
<b>mFOLFIRINOX</b>	175	128	66	39	21	10	6	2	0
<b>S-IROX</b>	176	133	68	42	21	8	4	0	

# OS Subgroup Analyses



# Progression-free Survival



Arm	Median (95% CI)	HR (95% CI)
Nab-PTX+GEM (n=176)	6.7 (5.7–7.4)	–
mFOLFIRINOX (n=175)	5.8 (5.1–6.9)	1.15 (0.91–1.45)
S-IROX (n=176)	6.7 (5.7–8.3)	1.07 (0.84–1.35)

Patients at risk

	0	6	12	18	24	30	36	42	48
Nab-PTX+GEM	176	78	26	16	10	5	2	1	0
mFOLFIRINOX	175	74	28	16	8	5	3	2	0
S-IROX	176	78	23	14	3	2	1	0	

# Tumor Response

Patients with measurable lesion (n=515)

	Nab-PTX+GEM (n=175)	mFOLFIRINOX (n=170)	S-IROX (n=170)
Objective response rate % 95% CI	35.4 28.4–43.0	32.4 25.4–39.9	42.4 34.8–50.2
Disease control rate % 95% CI	83.4 77.1–88.6	72.9 65.6–79.5	81.8 75.1–87.3
Best response, n (%)			
Complete response	0 (0)	1 (0.6)	0 (0)
Partial response	62 (35.4)	54 (31.8)	72 (42.4)
Stable disease	84 (48.0)	69 (40.6)	67 (39.4)
Progressive disease	20 (11.4)	31 (18.2)	21 (12.4)
Not evaluable	9 (5.1)	15 (8.8)	10 (5.9)

# Subsequent Anti-cancer Therapy

	Nab-PTX+GEM (n=176)	mFOLFIRINOX (n=175)	S-IROX (n=176)
Second-line therapy, n (%)	105 (59.7)	111 (63.4)	110 (62.5)
Chemotherapy	103 (58.5)	110 (62.9)	109 (61.9)
Chemoradiotherapy	2 (1.1)	1 (0.6)	1 (1.6)
Third-line therapy, n (%)	50 (28.4)	48 (27.4)	50 (28.4)
Chemotherapy	49 (27.8)	46 (26.3)	50 (28.4)
Chemoradiotherapy	1 (0.6)	2 (1.1)	0 (0)

# Adverse Events ( $\geq$ Grade 3; $\geq 5\%$ of patients in either arm)

Safety population (n=519)

Event, %	Nab-PTX+GEM (n=174)	mFOLFIRINOX (n=171)	S-IROX (n=174)
Neutropenia	60.3	51.5	38.7
WBC decreased	34.5	22.2	16.1
Anemia	10.9	10.5	10.9
Thrombocytopenia	4.6	4.7	8.6
Febrile neutropenia	3.4	8.8	7.5
Neuropathy	10.9	8.2	7.5
Infection	10.9	16.4	8.6
ALT increased	10.9	11.7	11.5
AST increased	8.1	9.4	6.9
Anorexia	5.2	22.8	27.6
Fatigue	2.9	4.1	6.3
Nausea	2.3	8.8	10.3
Diarrhea	1.1	8.8	23.0

# Conclusions

- GENERATE (JCOG1611) was terminated for futility because the planned interim analysis determined it is unlikely that the superiority of modified FOLFIRINOX or S-IROX over nab-paclitaxel plus gemcitabine could be demonstrated.
- The median OS was 17.0 months in the nab-paclitaxel plus gemcitabine arm, 14.0 months in the modified FOLFIRINOX arm, and 13.6 months in the S-IROX arm.
- $\geq$ Grade 3 GI toxicities were more frequent in the modified FOLFIRINOX and S-IROX arms than in the nab-paclitaxel plus gemcitabine arm.
- Compared to modified FOLFIRINOX or S-IROX, nab-paclitaxel plus gemcitabine is recommended as the first-line treatment for patients with metastatic or recurrent pancreatic cancer.



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Nagasaki University Hospital  
Kagoshima University Hospital

**European Society for Medical Oncology (ESMO)**

Via Ginevra 4, CH-6900 Lugano

T. +41 (0)91 973 19 00

[esmo@esmo.org](mailto:esmo@esmo.org)

[esmo.org](http://esmo.org)

