

Investigational Trials of Iberdomide (CC-220) in Patients With Relapsed or Refractory Lymphomas

CC-220-NHL-001

A Phase 1/2, Multicenter, Open-Label Study to Assess Safety, Pharmacokinetics, and Preliminary Efficacy of Iberdomide (CC-220), Alone and in Combination With an Anti-CD20 Monoclonal Antibody (mAb) in Subjects With Relapsed or Refractory Lymphomas^{1,2}

Enrolling

NCT04464798 Phase 1/2

PRIMARY ENDPOINTS

Maximum tolerated dose (MTD) and recommended Phase 2 dose (RP2D)

SELECT SECONDARY ENDPOINTS

AEs; pharmacokinetics; ORR, CR, TTR, and DoR, based on 2014 Lugano classification*; PFS; and OS

KEY ELIGIBILITY CRITERIA

R/R lymphoma
ECOG PS ≤2
ANC ≥1.5 x 10⁹/L or 1.0 x 10⁹/L with bone marrow involvement, without growth factor support for 7d (14d if pegfilgrastim)
Hemoglobin ≥8 g/dL
Platelets ≥75 x 10⁹/L or ≥50 x 10⁹/L with bone marrow involvement, without transfusion for 7d
AST/ALT ≤2.5 x ULN
Serum total bilirubin ≤1.5 x ULN (except in cases of Gilbert's syndrome, then ≤3.0 x ULN)
Estimated CrCl ≥50 mL/min

TREATMENT[†] Estimated N=152

Part 1: Dose Escalation

Cohort A:
iberdomide (CC-220) monotherapy
R/R lymphoma

RP2D

Part 2: Dose Expansion

Cohort D (optional):
iberdomide (CC-220) monotherapy
Other lymphoma

Cohort B:
iberdomide (CC-220) + rituximab
B-cell lymphoma

RP2D

Cohort E:
iberdomide (CC-220) + rituximab
Aggressive B-cell lymphoma

Cohort F:
iberdomide (CC-220) + rituximab
FL (1-3a) and MZL

Cohort C:
iberdomide (CC-220) + obinutuzumab
FL (1-3a) and MZL

RP2D

Cohort G:
iberdomide (CC-220) + obinutuzumab
FL (1-3a) and MZL

FOLLOW-UP

Safety
28 days after the last dose of iberdomide (CC-220)

Efficacy
Long-term assessments every 6 months for up to 2 years

[†]Up to progressive disease or 12 cycles for patients with FL or MZL, and up to progressive disease or 24 cycles for all other patients with lymphoma.

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CC-220-DLBCL-002

A Phase 1b/2 Randomized, Multicenter, Open-Label Study of Iberdomide (CC-220) in Combination With Polatuzumab Vedotin Plus Rituximab or Tafasitamab or Rituximab Plus Chemotherapy for Subjects With Relapsed or Refractory Aggressive B-Cell Lymphoma³

Enrolling soon

Phase 1b/2

PRIMARY ENDPOINTS

Part 1: MTD and RP2D
Part 2: ORR, based on 2014 Lugano classification*

SELECT SECONDARY ENDPOINTS

Part 1: Safety and tolerability, preliminary efficacy, and PK
Part 2: Safety, CR (based on 2014 Lugano classification*), PFS, OS, HRQoL, and PK

KEY ELIGIBILITY CRITERIA

Aggressive BCL according to 2016 WHO classification among the following subtypes:
- DLBCL, NOS (including GCB and ABC types)
- High-grade BCL, with *MYC* and *BCL2* and/or *BCL6* rearrangements
- Primary mediastinal (thymic) large B-cell lymphoma (PMBCL)
- Primary cutaneous DLBCL, leg type
- *ALK+* large BCL
- EBV+ DLBCL, NOS
- Grade 3b FL
≥2 prior lines of therapy, or ≥1 prior line of therapy and ineligible for ASCT
Previous treatment with CAR-T therapy allowed
ECOG PS ≤2

TREATMENT Estimated N=252

Part 1: Dose Escalation

Iberdomide (CC-220) + polatuzumab + rituximab

RP2D

R 2:1

Part 2: Randomized Dose Expansion

Iberdomide (CC-220) + polatuzumab vedotin + rituximab

Polatuzumab vedotin + bendamustine + rituximab

Iberdomide (CC-220) + tafasitamab

RP2D

R 2:1

Iberdomide (CC-220) + tafasitamab

Tafasitamab + lenalidomide

Iberdomide (CC-220) + rituximab + chemotherapy

RP2D

R 2:1

Iberdomide (CC-220) + rituximab + chemotherapy

Rituximab + chemotherapy

FOLLOW-UP

Follow up for adverse events, response assessment, survival, and development of secondary primary malignancies for up to 2 years

CONTACT: ClinicalTrialDisclosure@bms.com

Enrolling soon⁴

A Phase 1B, Open Label, Global, Multicenter, Dose Determination, Randomized Dose Expansion Study to Determine the Maximum Tolerated Dose, Assess the Safety and Tolerability, Pharmacokinetics and Preliminary Efficacy of Iberdomide (CC-220) and CC-99282 in Combination With R-CHOP-21 for Subjects With Previously Untreated, Poor Risk (IPI 3-5), Aggressive B-Cell Lymphoma

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The safety and efficacy of iberdomide (CC-220) and/or its uses are under investigation and have not been established.

There is no guarantee that iberdomide (CC-220) will receive health authority approval or become commercially available in any country for the uses being investigated.

*Recommendations for Initial Evaluation, Staging, and Response Assessment of Hodgkin and Non-Hodgkin Lymphoma.
ABC, activated B-cell; AE, adverse event; ALK, anaplastic lymphoma kinase; ALT, alanine aminotransferase; ANC, absolute neutrophil count; d, days; ASCT, autologous stem cell transplant; AST, aspartate aminotransferase; BCL, B-cell lymphoma; CR, complete response; CrCl, creatinine clearance; DLBCL, diffuse large B-cell lymphoma; DoR, duration of response; EBV, Epstein-Barr virus; ECOG PS, Eastern Cooperative Oncology Group performance status; FL, follicular lymphoma; GCB, germinal center B-cell; HRQoL, health-related quality of life; MZL, marginal zone lymphoma; NOS, not otherwise specified; ORR, objective response rate; OS, overall survival; PFS, progression-free survival; PK, pharmacokinetics; R/R, relapsed/refractory; TTR, time to response;
ULN, upper limit of normal; WHO, World Health Organization.
1. Clinicaltrials.gov. NCT04464798. Accessed October 29, 2020. 2. Bristol-Myers Squibb Company. Data on file (protocol number CC-220-NHL-001). 3. Bristol-Myers Squibb Company. Data on file (protocol number CC-220-DLBCL-002). 4. Bristol-Myers Squibb Company. Data on file (protocol number CC-220-DLBCL-001).
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