

# Clinical Study Results

**Research Sponsor:** MedImmune LLC

**Drug Studied:** MEDI3726

**Study Title:** A study to learn about the safety of MEDI3726 in participants with metastatic castration-resistant prostate cancer, also known as mCRPC

---

## ***Thank you!***

Thank you for taking part in the clinical study for the study drug MEDI3726.

MedImmune LLC sponsored this study and believes it is important to share the results. An independent non-profit organization called CISCRP helped prepare this summary of the study results for you.

If you participated in the study and have questions about the results, please speak with the study doctor or staff at your study site.

## **Who took part in the study?**

The researchers asked for the help of men with a type of prostate cancer called metastatic castration-resistant prostate cancer. The participants in this study were 54 to 81 years old when they joined.

The study included 33 participants in Switzerland, the UK, and the USA.

## **Why was the research needed?**

Researchers are looking for a better way to treat prostate cancer in people who have already tried other treatments, but whose disease has still gotten worse. Before a drug can be approved for people to get, researchers do clinical studies to find out how safe it is and how it works.

Metastatic castration-resistant prostate cancer, also known as mCRPC, is a type of prostate cancer that gets worse despite getting treatments to lower the testosterone levels in the body. “Metastatic” means the cancer has spread to other parts of the body.

The study drug MEDI3726 was designed to recognize and kill the tumor cells responsible for the spread of mCRPC in the body.

In this study, the researchers wanted to find out about the safety of MEDI3726 in participants with mCRPC.

## What was the purpose of this study?

The main questions the researchers wanted to answer in this study were:

- What signs and symptoms did the participants have during the study?
- What medical problems happened during the study?

The answers to these questions are important to know before other studies can be done to find out if MEDI3726 helps improve the health of people with mCRPC.

## What treatments did the participants take?

This was an “open-label” study. This means the participants, researchers, study doctors, and other study staff knew what treatment each participant was getting.

All of the participants in this study got MEDI3726 through a needle into a vein, also known as an IV infusion. They got an IV infusion once every 3 weeks until they had medical problems, their disease got worse, or the study doctors decided they should stop.

There were 7 different dose groups of MEDI3726. Each dose group started the study one after the other at the next highest dose. At the beginning of the study, the first dose group of participants started getting the lowest dose of MEDI3726. The researchers looked at the results for these participants. Then, they decided whether to increase the dose of MEDI3726 in the next dose group of participants.

The doses were measured in milligrams per kilogram of a participant’s body weight, also known as mg/kg. Each participant stayed in the same dose group throughout the study.

The chart below shows the treatments the researchers studied.

Dose of MEDI3726	Number of participants (out of 33)
0.015 mg/kg	1
0.03 mg/kg	3
0.06 mg/kg	3
0.15 mg/kg	4
0.2 mg/kg	10
0.25 mg/kg	7
0.3 mg/kg	5

The researchers had planned to include more participants, but the study was stopped early. It was stopped because participants were having medical problems, their disease was getting worse, or both.

## What happened during the study?

The study started in January 2017 and ended in September 2019.

**Before the participants got study treatment,** they visited their study site 1 time. This happened about 4 weeks before the participants got study treatment. At this visit, the study doctors made sure that the participants could join the study. They also:

- did a physical exam and asked about the participants' medications and any medical problems they were having
- checked the participants' heart health using an electrocardiogram, also called an ECG, and an echocardiogram
- took pictures of each participant's tumors using CT or MRI scans
- did a procedure called a biopsy to take a sample of the tumors of some of the participants
- took blood and urine samples

The study doctors also did these tests and measurements throughout the study.

**While the participants were getting study treatment,** they visited their study site 7 times over 6 weeks. Then, they visited every 3 weeks until they stopped study treatment. At these visits, the participants got their IV infusions of MEDI3726 and the study doctors checked their health.

**After the participants got study treatment,** they visited their study site 3 times over 3 months. At these visits, the study doctors checked the health of the participants.

## What were the results of the study?

This is a summary of the main results from this study overall. The results each participant had might be different and are not in this summary.

Researchers look at the results of many studies to decide which treatments work best and are safest. Other studies may provide new information or different results. Always talk to a doctor before making any treatment change.

The websites listed at the end of this summary may have a full report of the study results.

## **What signs and symptoms did the participants have during the study?**

To answer this question, the study doctors did tests and measurements before and after the participants got MEDI3726. The doctors did physical exams and tested the participants' blood and urine samples to check their overall health. They also did ECGs to check the participants' heart health.

Overall, the researchers found that the participants did have some changes in their blood tests after getting treatment. Some measurements were too high, and some were too low.

The measurements that were too high were:

- liver proteins called ALT, AST, GGT, and ALP
- digestive system proteins called lipase and amylase
- blood sugar
- urine crystals in blood, also called urate

The measurements that were too low were:

- blood cells that help form clots, also called platelets
- a blood protein that carries oxygen, also called hemoglobin
- overall white blood cells
- one of the types of white blood cells called neutrophils
- blood potassium and sodium

The researchers found that there were some small changes in the results of the other tests and measurements. But, the researchers did not consider these to be significant.

The study doctors also kept track of the “adverse events” that the participants had. An adverse event is any sign or symptom that participants have during a study. Doctors keep track of all the adverse events that happen in studies, even if they do not think the adverse events might be related to the study treatment.

Later in this document, there will be a summary of the adverse events that the study doctors thought might be related to the study treatment. This section is a summary of all the adverse events, whether they might be related to the study treatment or not. An adverse event is considered “serious” when it is life-threatening, causes lasting problems, or the participant needs hospital care.

Adverse events may or may not be caused by the treatments in the study. A lot of research is needed to know whether a treatment causes an adverse event.

How many participants had adverse events?	100.0% (33 out of 33 participants)
How many participants had serious adverse events?	54.5% (18 out of 33 participants)
How many participants stopped taking study treatment because of adverse events?	33.3% (11 out of 33 participants)

The most common serious adverse events were:

- kidney injury
- difficulty breathing
- fluid build-up in the lungs
- loss of fluid from blood vessels into the body

The most common adverse events were:

- a low number of red blood cells
- nausea
- fatigue
- decreased appetite
- difficulty breathing
- fluid build-up in the lungs
- high levels of liver proteins called ALT, AST, and GGT

The study doctors also counted the number of dose-limiting toxicities the participants had during the study. A dose-limiting toxicity is an adverse event that is severe enough to stop the study doctor from increasing the participant's dose of study treatment. A dose-limiting toxicity is also known as a DLT.

3.0% of the participants had a DLT during the study. This happened in 1 out of 33 participants.

## What medical problems happened during the study?

This section is a summary of the medical problems the participants had during the study that the study doctors thought might be related to the study drug. These medical problems are called “adverse reactions”. An adverse reaction is considered “serious” when it is life-threatening, causes lasting problems, or requires hospital care.

These adverse reactions may or may not be caused by the study drug. A lot of research is needed to know whether a drug causes an adverse reaction. These adverse reactions have been, and will continue to be, reviewed together with all of the available data for drug.

The websites listed at the end of this summary may have other information about adverse reactions or other medical problems that happened during this study.

### Did any adverse reactions happen during this study?

How many participants had adverse reactions?	90.9% (30 out of 33 participants)
How many participants had serious adverse reactions?	33.3% (11 out of 33 participants)
How many participants stopped taking study treatment because of adverse reactions?	33.3% (11 out of 33 participants)

This study was stopped early because of some of the adverse reactions that happened in the study. These adverse reactions that happened in more than 1 participant were fluid build-up in the lungs, fatigue, loss of fluid from the blood vessels into the body, and a low number of red blood cells.

### What serious adverse reactions happened during this study?

The most common serious adverse reaction was fluid build-up in the lungs.

The table below shows the most common serious adverse reactions that happened in more than 1 participant. There were other serious adverse reactions, but these happened in fewer participants.

Most common serious adverse reactions	
Serious adverse reactions	MEDI3726 (out of 33 participants)
Fluid build-up in the lungs	15.2% (5)
Loss of fluid from blood vessels into the body	9.1% (3)

## What adverse reactions happened during this study?

The most common adverse reaction was increased levels of liver proteins called ALT, AST, and GGT.

The adverse reactions below happened in 25% or more of the participants. This was 9 or more out of 33 participants. There were other adverse reactions, but these happened in fewer participants.

### Most common adverse reactions

Adverse reactions	MEDI3726 (out of 33 participants)
Increased levels of a liver protein called ALT	36.4% (12)
Increased levels of a liver protein called AST	33.3% (11)
Increased levels of a liver protein called GGT	30.3% (10)
Fatigue	30.3% (10)
Fluid build-up in the lungs	27.3% (9)

## How has this study helped patients and researchers?

This study helped researchers learn more about how safe MEDI3726 was to take for participants with mCRPC.

Researchers look at the results of many studies to decide which treatments work best and are safest. This summary shows only the main results from this one study. Other studies may provide new information or different results.

Further clinical studies with MEDI3726 are not planned for prostate cancer.

## Where can I learn more about this study?

You can find more information about this study on the websites listed below. If more information about the study results is available, it can also be found here.

- [www.clinicaltrials.gov](http://www.clinicaltrials.gov). Once you are on this website, type “**NCT02991911**” into the search box and click “**Search**”.
- [www.AstraZenecaClinicalTrials.com](http://www.AstraZenecaClinicalTrials.com). Once you are on the website, type “**D9320C00001**” into the search box, and click “**Find a Study**”.

**Full Study Title:** A Phase 1/1b Multicenter, Open-Label, Dose-Escalation and Dose-Expansion Study to Evaluate the Safety, Pharmacokinetics, Immunogenicity, and Antitumor Activity of MEDI3726 in Subjects with Metastatic Castration Resistant Prostate Cancer (mCRPC) who have Received Prior Treatment with Abiraterone or Enzalutamide

**AstraZeneca Protocol Number:** D9320C00001

**National Clinical Trials number:** NCT02991911

MedImmune LLC sponsored this study and has its headquarters in Gaithersburg, MD, USA.

**The phone number** for the AstraZeneca Information Center is +1 877 240 9479.

## *Thank you!*

Clinical study participants belong to a large community of people who take part in clinical research around the world. They help researchers answer important health questions and find medical treatments for patients.



The Center for Information & Study on Clinical Research Participation (CISCRP) is a non-profit organization focused on educating and informing the public about clinical research participation. CISCRP is not involved in recruiting participants for clinical studies, nor is it involved in conducting clinical studies.

CISCRP  
One Liberty Square, Suite 1100 • Boston, MA 02109  
1-877-MED-HERO • [www.ciscrp.org](http://www.ciscrp.org)



## SIGNATURE PAGE

*This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature*

<b>Document Name:</b> d9320c00001-lay-language-summary		
<b>Document Title:</b>	D9320C00001 Lay Language Summary	
<b>Document ID:</b>	Doc ID-004457984	
<b>Version Label:</b>	1.0 CURRENT LATEST APPROVED	
<b>Server Date</b> (dd-MMM-yyyy HH:mm 'UTC'Z)	<b>Signed by</b>	<b>Meaning of Signature</b>
08-Jan-2021 13:34 UTC	Bhardwaj Desai - C	Author Approval
19-Jan-2021 16:47 UTC	Kelly Brown C	Qualified Person Approval
12-Jan-2021 22:26 UTC	Kwame Mensah	Content Approval

Notes: (1) Document details as stored in ANGEL, an AstraZeneca document management system.