

Study of investigational odronextamab + cemiplimab in patients with **relapsed or refractory aggressive B-cell non-Hodgkin lymphoma**



Primary Objective: evaluate the safety and tolerability, and identify the recommended dose regimen of the combination of odronextamab and cemiplimab in patients with R/R aggressive B-cell non-Hodgkin lymphoma



PATIENTS WITH R/R AGGRESSIVE B-CELL NON-HODGKIN LYMPHOMA (N~62)

OPEN LABEL INTERVENTION

Dose Escalation

Odronextamab (IV) + cemiplimab (IV)



Dose Expansion

Recommended Phase 2 dose
odronextamab (IV) + cemiplimab (IV)

Primary Endpoints

DLTs, TEAEs, AESIs

Secondary Endpoints

Pharmacokinetics
Immunogenicity

Anti-tumor activity:
Overall response rate^a
Complete response rate^a
Duration of response^a



FIND OUT MORE

Scan here to find out more about this study at <https://classic.clinicaltrials.gov/ct2/show/NCT02651662>

This information is intended for investigators interested in open clinical trials.

The use of odronextamab + cemiplimab described herein is investigational and has not been evaluated by any regulatory authority. Please see full prescribing information in your country for cemiplimab.

^aAssessed by investigator.

AESI, adverse event of special interest; DLT, dose limiting toxicity; IV, intravenous; R/R, relapsed or refractory; TEAE, treatment-emergent adverse event.

ODRONEXTAMAB

An Investigational CD20xCD3 Bispecific Antibody

Simultaneously engages CD20 on B cells and CD3 on cytotoxic T cells¹



CEMIPLIMAB

An Investigational, Fully Human PD-1 Monoclonal Antibody

Designed to inhibit cancer cells from exploiting the PD-1 pathway, ensuring T cell activation remains unhindered for an effective immune response against cancer cells²

SELECTED INCLUSION CRITERIA^a



Documented CD20+ aggressive B-cell NHL that is either not responsive to or relapsed after at least 2 prior lines of systemic therapy that must include an anti-CD20 antibody and an alkylating agent



At least 1 nodal lesion (≥ 1.5 cm), or at least one extranodal lesion with longest transverse diameter greater than 1.0 cm, documented by diagnostic imaging CT or MRI



ECOG PS 0 or 1



Adequate bone marrow and hepatic function

SELECTED EXCLUSION CRITERIA^a



Primary CNS lymphoma, or known or suspected CNS involvement by nonprimary CNS NHL



History of or current relevant CNS pathology



Evidence of significant autoimmune disease that required treatment with systemic immunosuppressive treatment within 2 years



Uncontrolled infection with HIV, hepatitis B or hepatitis C infection or other uncontrolled infection



Known hypersensitivity to both allopurinol



For more information, visit www.clinicaltrials.gov or please call [+353 (0)61 533 400 or 844 REGN-MID].
NCT02651662
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^aInclusion/exclusion criteria include a summary of selected criteria. Please review the complete study design on clinicaltrials.gov for complete details.

CD, cluster of differentiation; CNS, central nervous system; CT, computed tomography; ECOG PS, Eastern Cooperative Oncology Group performance status; HIV, human immunodeficiency virus; MRI, magnetic resonance imaging; NHL, non-Hodgkin lymphoma; PD-1, programmed cell death ligand 1.

Current per clinicaltrials.gov as of January 30, 2024.

1. Smith EJ et al. *Sci Rep.* 2015;5:17943. 2. Markham A, Duggan S. *Drugs.* 2018;78(17):1841-1846.
Odronextamab-EM-0011 v2.0 February 2024.
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