

# Study of investigational linvoseltamab in patients with relapsed or refractory multiple myeloma



**Primary Objective:** evaluate the safety and efficacy of linvoseltamab in patients with relapsed or refractory (R/R) multiple myeloma



**PATIENTS WITH R/R MM (N≈387)**

## OPEN LABEL INTERVENTION

**Phase 1**  
Part 1: Dose escalation with IV linvoseltamab  
**Not active**  
Part 2: Dose escalation with SC linvoseltamab  
**Ex-US only**



**Phase 2 (cohort 1)**  
Safety and efficacy with low dose IV linvoseltamab  
**Not active**

**Phase 2 (cohort 2)**  
Safety and efficacy with high dose IV linvoseltamab  
**Not active**

**Phase 2 (cohort 3)**  
Safety and efficacy in patients pretreated with anti-IL6 therapy  
Prophylactic anti-IL6 treatment, and potential for inclusion of patients who relapse after BCMA CAR T therapy<sup>a</sup>  
**Ex-US only**

## Primary Endpoints

**Phase 1:**  
Incidence of DLTs, TEAEs, AESI  
Pharmacokinetic evaluation (Phase 1 Part 2)

**Phase 2:**  
Incidence and severity of CRS (cohort 3)  
Objective response rate<sup>b,c</sup>

## Secondary Endpoints

**Phase 1/2:**  
Objective response rate<sup>b</sup>  
Duration of response (Phase 2, cohorts 1 and 2)<sup>b</sup>  
Progression free survival (Phase 2, cohorts 1 and 2)<sup>b</sup>  
MRD-negative status<sup>b</sup>  
Overall survival<sup>b</sup>  
Immunogenicity  
Pharmacokinetics (Phase 1, part 1)

**Phase 2:**  
HRQoL  
Safety  
Tolerability



### FIND OUT MORE

Scan here to find out more about this study at <https://clinicaltrials.gov/ct2/show/NCT03761108>

This information is intended for investigators interested in open clinical trials.  
Linvoseltamab is an investigational agent and has not been evaluated by any regulatory authority.

<sup>a</sup>See detail on back of card. <sup>b</sup>Using the International Myeloma Working Group (IMWG) response criteria.

<sup>c</sup>Determined by Independent Review Committee (Phase 2, cohorts 1 and 2); Based on investigator assessment (Phase 2, cohort 3).  
AESI, adverse events of special interest; BCMA, B-cell maturation antigen; CAR T, chimeric antigen receptor T-cell; CRS, cytokine release syndrome; DLT, dose-limiting toxicity; HRQoL, health-related quality of life; IL-6, interleukin-6; IV, intravenous; MM, multiple myeloma; MRD, minimal residual disease; N, number of patients; SC, subcutaneous; TEAEs, treatment-emergent adverse events.

# LINVOSELTAMAB

## An Investigational BCMAxCD3 Bispecific Antibody

Designed to simultaneously engage BCMA on MM cells with CD3 on T cells<sup>1</sup>

### SELECTED INCLUSION CRITERIA<sup>a</sup>

0 or 1

ECOG PS 0 or 1



Measurable disease according to IMWG consensus criteria

P1

**Phase 1, Part 1:** Progression on or after at least 3 prior lines of therapy including a PI, IMiD, and anti-CD38 antibody, OR progression on or after anti-CD38 antibody and patients must be "double refractory" to PI and IMiD/intolerance<sup>b</sup>

P1

**Phase 1, Part 2:** Progression on or after at least 3 prior lines of therapy including a PI, IMiD, and anti-CD38 antibody<sup>b</sup>, OR patients must be triple-refractory<sup>c</sup>, defined as being refractory<sup>c</sup> to prior treatment with at least one anti-CD38<sup>b</sup> antibody, PI, and IMiD

P2

**Phase 2:** Progression on or after at least 3 prior lines of therapy including a PI, IMiD, and anti-CD38 antibody, OR patients must be triple-refractory, defined as being refractory<sup>c</sup> to prior treatment with at least one anti-CD38 antibody, PI, and IMiD

#### Cohort 3

For ALL patients, if they have relapsed after a BCMA-directed CAR T cellular therapy then:

- Treatment with a CAR T must have been associated with a response of PR or better, and
- If CAR T cellular therapy was the most recent prior therapy, excluding corticosteroids, then treatment must have been a minimum of 60 days prior to treatment with linvoseltamab

### SELECTED EXCLUSION CRITERIA<sup>a</sup>



Diagnosis of plasma cell leukemia, primary light-chain amyloidosis, Waldenström macroglobulinemia, or POEMS syndrome



Known MM brain lesions or meningeal involvement



Cardiac ejection fraction <40%<sup>d</sup>



Prior treatment with BCMA-directed immunotherapies, including BCMA bispecific antibodies and BiTEs. Note: BCMA antibody-drug conjugates are not excluded and BCMA-directed CAR T treatment is not excluded in Phase 2 Cohort 3<sup>e,f</sup>



History of allogeneic stem cell transplantation, or autologous stem cell transplantation within 12 weeks of the start of study drug regimen



For more information, visit [www.clinicaltrials.gov](http://www.clinicaltrials.gov) or please call [844 REGN-MID (US and Canada) or +353 (0)61 533 400 (Rest of the world)]. NCT03761108  
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<sup>a</sup>Inclusion/exclusion criteria include a summary of selected criteria. Please review the complete study design on [clinicaltrials.gov](http://clinicaltrials.gov) for complete details. <sup>b</sup>The anti-CD38 antibody may have been administered alone or in combination with another agent such as a PI; <sup>c</sup>Defined as progression during treatment or within 60 days after completion of therapy, or <25% response to therapy; <sup>d</sup>Measured by echocardiogram (ECG) or multi-gated acquisition scan (MUGA); <sup>e</sup>For phase 2 cohort 3, patients previously treated with a BCMA-directed CAR T cellular therapy: treatment must not have been associated with grade 3 or higher ICANS at any time during CAR T cellular therapy treatment, and treatment must not have been associated with a treatment-related movement disorder that has not resolved to baseline; <sup>f</sup>For all patients in phase 2 cohort 3: a positive test result for latent tuberculosis, history of an invasive fungal infection such as candidiasis, aspergillosis, or pneumocystis, an active opportunistic infection, or known hypersensitivity to tocilizumab.

AES, adverse event of special interest; BCMA, B-cell maturation antigen; BiTE, bispecific T-cell engager; CAR T, chimeric antigen receptor T-cell; CD, cluster of differentiation; CRS, cytokine release syndrome; DLT, dose-limiting toxicities; ECOG PS, Eastern Cooperative Oncology Group performance status; HRQoL, health-related quality of life; ICANS, immune effector cell-associated neurotoxicity syndrome; IL6, interleukin-6; IMiD, immunomodulatory imide drug; IMWG, International Myeloma Working Group; IV, intravenous; MM, multiple myeloma; ORR, objective response rate; PI, proteasome inhibitor; POEMS, polyneuropathy, organomegaly, endocrinopathy, monoclonal protein, and skin changes; PR, partial response; SC, subcutaneous; TEAE, treatment-emergent adverse event.

Current per [clinicaltrials.gov](http://clinicaltrials.gov) as of February 13, 2024.

1. DiLillo DJ et al. *Blood Adv.* 2021;5(5):1291–04.

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