Abstract 6061: Initial results of MC200710 Therapeutic Vaccine (PDS0101) alone or with Pembrolizumab Prior to Surgery or RT for Locally Advanced HPV16+ Oropharyngeal Squamous Cell Carcinoma

David M. Routman, Katharine A.R. Price, Erik Asmus, Nathan R. Foster, Eric J. Moore, Daniel L. Price, Kendall Tasche, Linda X. Yin, Patrick W. McGarrah, Harry E Fuentes Bayne, Courtney L. Erskine, Kathleen R. Bartemes, Ronen Stoff, Scott Lester, Daniel J. Ma, Michelle A. Neben-Wittich, Jessica M. Wilson, Matthew S. Block, Kathryn M. Van Abel, Ashish V. Chintakuntlawar Email: outman.David@mayo.edu

Background

- **PDS0101** is a T cell stimulating immunotherapy (therapeutic vaccine) targeting HPV16
- 5 cycles of PDS0101 + pembrolizumab has shown durable responses in HPV-positive recurrent/metastatic HNSCC

MC200710 is a Phase 2 Window of Opportunity study

- Patients with locally advanced HPV+ OPSCC
- Two cycles of neoadjuvant PDS0101 +/- pembrolizumab prior to surgical resection or chemoradiotherapy (CRT)

Methods

20 patients (10 per arm) were enrolled between 2022 and 2024

Sequential alternating design:

<u>ARM A – 2 cycles of PDS0101</u> **ARM B** – 2 cycles of PDS0101 + Pembrolizumab

- \bullet reported and compared across arms (Fisher's Exact Test)
- Secondary end point of Radiologic Object Response Rate
- Toxicity was assessed using CTCAE criteria
- Recurrence rates (Kaplan Meier Analysis)

Majority Male (90%)

Median age 61 years

Patients

No smoking hist

Majority cT1/T2 (70%)

Majority cN1 (65%)

Primary Surgical Management (65%) Primary Chemoradiation (35%)

Figure 1: ctDNA response **Arm B** had a significantly improved ctDNA response rate (50%) as compared to Arm A (0%), p=0.0325



Baseline

Results



Outcomes:

- All patients completed all cycles and initiated definitive therapy
- for ARM B

Toxicity:

- Limited toxicity was observed. Injection site majority were grade 1
- 1 patient experienced grade 2 toxicity grade 3 toxicity (transient hepatitis, ARM A) possibly related

The combination of PDS0101 and pembrolizumab met the primary endpoint of MC200701 and shows promise for further evaluation.

50% of patients receiving PDS0101 + Pembrolizumab (ARM B) had a significant decline in ctDNA

	Conclusions
tory 65%	 Clinical activity was seen with PDS0101 with or without pembrolizumab.
%)	 The combination of PDS0101 and pembrolizumab met MC200710's primary endpoint of ctDNA response and shows promise for further evaluation.



With a median follow up of 6 months, 2 patients in ARM A had cancer recurrence and 0 in ARM B.

OS at 12 months was 80% for ARM A and 100%

reaction was the most common toxicity of which

(pneumonitis, ARM B), and 1 patient experiencing



Figure 2: Radiologic ORR 70% of pts in Arm A had stable disease and 100% of pts in Arm **B** had stable disease or partial response (20%)

Future Directions

- PDS0101 + Pembrolizumab is being tested in a Phase III study Versatile 003 (<u>NCT06790966</u>)
- Given the promising results seen here PDS0101 + Pembrolizumab should be evaluated in locally advanced HPV+ OPSCC in the neoadjuvant setting