Summary of Clinical Trial Results

A study of atezolizumab plus enzalutamide compared with enzalutamide alone in men with prostate cancer that has spread to other parts of the body

See the end of the summary for the full title of the study.

About this summary

This is a summary of the results of a clinical trial (called a 'study' in this document) and was written for:

- Members of the public and
- People who took part in the study.

This summary is based on information known at the time it was written (August 2021)

The study started in June 2017. This summary includes the results that were collected until June 2021. At the time of writing this summary, the study is still happening – study doctors are still collecting information.

You should not make decisions based on this one summary – always speak to your doctor before making any decisions about your treatment.

Contents of the summary

Thank you to the people who took part in this study

The people who took part have helped researchers to answer important questions about prostate cancer and about treatment with atezolizumab taken with enzalutamide.

Key information about this study

- This study was done to see if adding a new medicine to already existing medicines would help keep cancer from getting worse in men with prostate cancer that has spread to other parts of the body.
- In this study, men were given either the medicine being studied (called 'atezolizumab,' a type of immunotherapy) taken with enzalutamide (a male-hormone lowering medication) or enzalutamide alone. It was determined completely by chance which treatment each person was given.
- This study included 759 men in 26 countries/regions.
- This study has shown that men taking atezolizumab plus enzalutamide lived for around 15 months on average from the start of the study, compared to around 17 months on average for those taking enzalutamide alone.
- About 36% of men (36 out of 100 men) taking atezolizumab plus enzalutamide had severe side effects, compared to 22% of men (22 out of 100 men) taking enzalutamide alone.
- At the time of writing this summary (August 2021), the study is still happening.

1. General information about this study

Why was this study done?

Men with prostate cancer that has spread to other parts of the body are often treated with drugs that lower the amount of male hormones in the body. Male hormones may help the tumours grow, so taking drugs that lower the amount of male hormones in the body can stop the tumours from getting bigger or even make them shrink. However, some tumours start growing again, even with the hormone-lowering drugs. Doctors may then use combinations of drugs that act in different ways to help prevent tumours from growing for a longer period of time.

In this study, researchers wanted to see if combining a hormone-lowering drug with an immunotherapy called atezolizumab would extend people's lives better than the hormone-lowering drug by itself. They also wanted to see whether the combination would be safe for people to take.

What are the study medicines?

This study looked at a medicine called 'atezolizumab' (known by its brand name, Tecentriq®).

- The body's immune system fights diseases like cancer. However, cancer cells can block (stop) the immune system from attacking the cancer. Atezolizumab releases this blockage – meaning that the immune system is able to fight the cancer cells.
- This medicine is a type of immunotherapy.
- When people take atezolizumab, their tumour (cancer) may get smaller.

In **Group A**, atezolizumab was taken together with a medicine called enzalutamide (known by its brand name Xtandi®).

- Cancer needs the male hormone (called 'testosterone') to grow.
- Enzalutamide stops testosterone from getting to cancer cells so it can stop cancer from growing.
- This medicine is a type of antiandrogen.

In this study, **Group A** was compared to enzalutamide alone (**Group B**).

What did researchers want to find out?

- Researchers wanted to see whether treating men who have prostate cancer that has spread with a combination of medicines (atezolizumab plus enzalutamide) would extend people's lives, compared with enzalutamide by itself.
    - See section 4 "What were the results of the study?".
- They also wanted to find out which side effects occurred when taking both medicines together and how severe they were.
    - See section 5 "What were the side effects?".

The main question that researchers wanted to answer were:

1. In **Group A** and **Group B**, how long did people live in this study?

Other questions that researchers wanted to answer included:

2. How safe is the combination of atezolizumab plus enzalutamide? How many men in **Group A** and **Group B** had side effects? How severe were these side effects?

What kind of study was this?

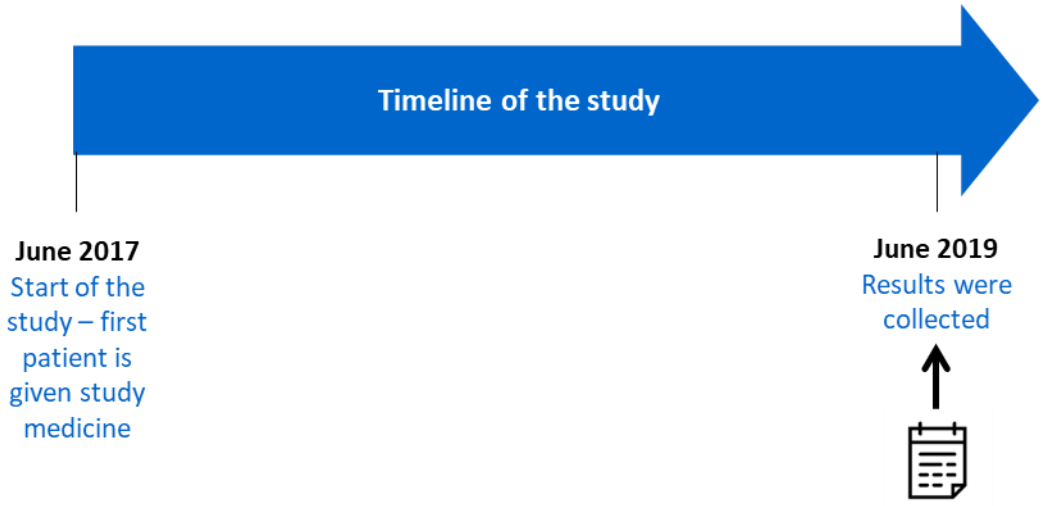
This study was a '**Phase 3**' study. This means that a large number of men with prostate cancer took either atezolizumab with enzalutamide or enzalutamide by itself– this was to find out if adding atezolizumab to enzalutamide helped men lived longer. Phase 3 studies are done in a large number of people to see if a drug works better than the usual treatment and is safe enough for it to be 'approved' by the authorities as a treatment that can be prescribed by your doctor.

The study was '**randomised**'. This means that it was determined by chance which of the medicines each man would be given – like tossing a coin. Randomly choosing which medicine people take makes it more likely that the types of people in both groups (for example, age, race) will be similar. Other than the medicines being tested in each group, all other care was the same in both groups.

This was an '**open label**' study. This means that both the people taking part in the study and the study doctors knew which study medicines people were taking.

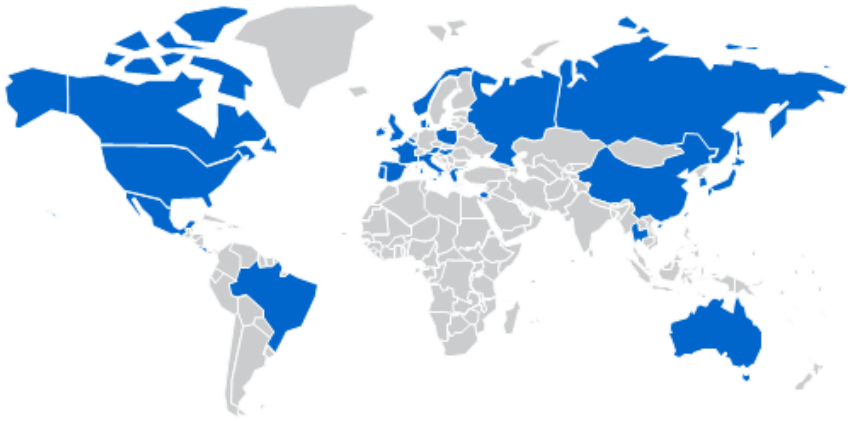
When and where did the study take place?

The study started in June 2017. This summary includes the results up to June 2019. At the time of writing this summary (August 2021), the study is still happening – study doctors are still collecting information.



The timeline (📋) shows when the information shown in this summary was collected – 2 years (June 2019) after the study started.

The study took place at 158 study centres in 26 countries/regions around the world. The following map shows the countries where this study took place.



- Australia
- Austria
- Belgium
- Brazil
- Canada
- China
- Costa Rica
- Denmark
- France
- Greece
- Hungary
- Ireland
- Israel
- Italy
- Japan
- Mexico
- Norway
- Poland
- Portugal
- Russia
- South Korea
- Spain
- Taiwan
- Thailand
- United Kingdom
- United States

2. Who took part in this study?

In this study, 759 men with prostate cancer that had spread to other parts of the body took part. People who took part in the study were between 40 and 92 years old.

Men could take part in the study if they:

- Were 18 years of age or older.
- Had a type of prostate cancer that has spread to other parts of the body.
- Had already been treated for their cancer with male hormone-lowering medicine and for whom these medicines no longer work.
- Had already been treated or could not be treated for their cancer with medicine that stops cancer from growing larger by dividing into new cells.
- Were not currently taking a hormone blocking medicine called enzalutamide.

3. What happened during the study?

During the study, men were selected by chance to get one of the 2 treatments.

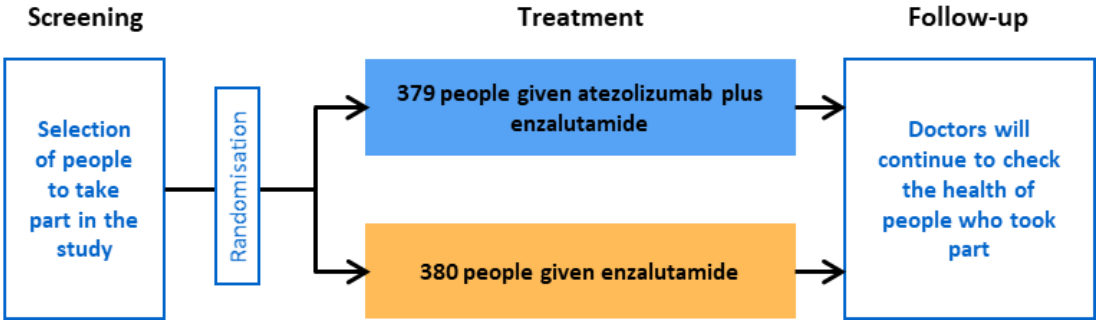
The treatment groups were:

- **Group A:** atezolizumab (study medicine) plus enzalutamide (existing medicine)
- **Group B:** enzalutamide alone (existing medicine)

This table shows the number of people who took each study treatment, and how often the drugs were taken.

	Group A Atezolizumab plus enzalutamide	**Group B Enzalutamide**
Number of people taking this medicine	379	380
When and how the drugs were taken	Atezolizumab was injected into a vein once every 3 weeks Enzalutamide was taken by mouth every day	

This picture shows what happened in the study.

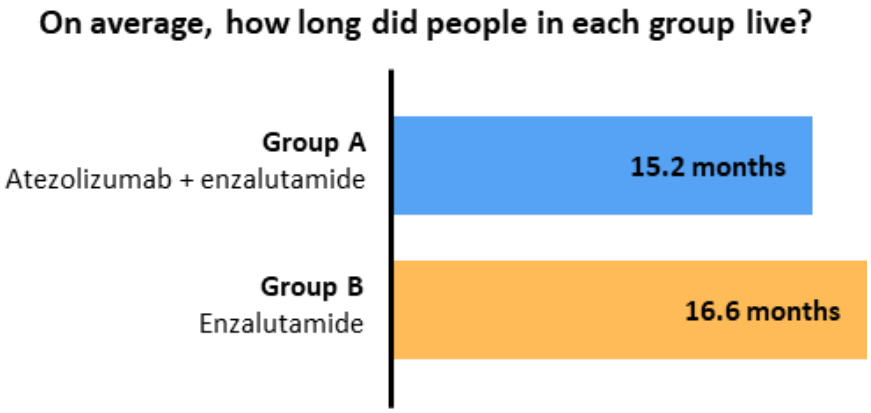


4. What were the results of the study?

Question 1: How long did people in Group A live in this study, compared to those in Group B?

- When this information was collected and analysed in June 2019, 23 months after the study started:
    - 211 out of 379 patients in **Group A** (56% or nearly 56 out of 100) had died.
    - 182 out of 380 patients in **Group B** (48% or nearly 48 out of 100) had died.
- Researchers also looked how long people in **Group A** and people in **Group B** lived on average:
    - People in **Group A** lived for about 15.2 months after they started taking their study medicine.
    - People in **Group B** lived for about 16.6 months after they started taking their study medicine.

These numbers are averages – that means that some people died sooner and some people lived longer.



This section only shows the key results from this study. You can find information about all other results on the websites at the end of this summary (see section 8).

5. What were the side effects?

Side effects are medical problems (such as feeling dizzy) that happen during the study.

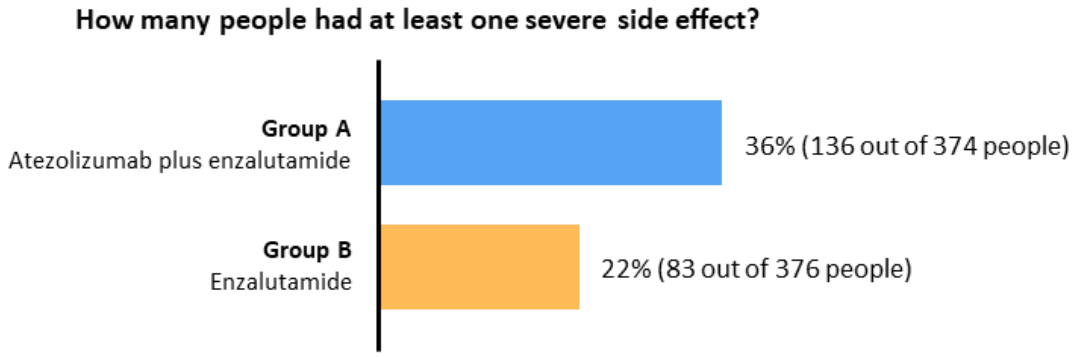
- Some side effects were caused by treatments in the study.
- Not all of the men in this study had all of the side effects.
- Side effects were mild to severe.
- The side effects were different from person to person.
- It is important to be aware that the side effects reported here are from this one study. Therefore, the side effects shown here may be different from those seen in other studies, or those that appear on the medicine leaflets.
- Severe and common side effects are listed in the following sections.

Only men who took at least one of the study treatments (374 out of 379 men in **Group A** and 376 out of 380 men in **Group B**) were studied for side effects. 5 men in **Group A** and 4 men in **Group B** did not take any of the study medicines.

Severe side effects

A side effect is considered 'severe' if it is life-threatening, needs hospital care, or causes lasting problems.

During this study, 29 in every 100 men (29%) had at least one severe side effect. About 36% of the men taking atezolizumab plus enzalutamide had a severe side effect, compared with about 22% of the men taking enzalutamide alone.



Some men died due to side effects that occurred during the time they were taking the study treatment. These were:

- 16 out of 374 men (4%) in the atezolizumab plus enzalutamide group.
- 12 out of 376 men (3%) in the enzalutamide group.

During the study, some men decided or were directed by their doctor to stop taking their medicine because of side effects:

- In the atezolizumab plus enzalutamide group, 20 out of 374 men (5%) stopped taking atezolizumab and 6 out of 376 men (2%) stopped taking enzalutamide.
- In the enzalutamide group, 20 out of 376 men (5%) stopped taking enzalutamide.

Most common side effects

In this study, 361 out of 374 men (97%) taking atezolizumab plus enzalutamide had a side effect of any kind (not severe or severe), compared with 345 out of 376 men (92%) taking enzalutamide.

This table shows the most common side effects – these are the side effects that happened in one-tenth (10%) or more of the men in either **Group A** or **Group B**. These side effects could have been severe or not severe (meaning an undesirable effect, but one that was not life-threatening and did not require hospitalisation or have lasting effects). Some men had more than one side effect – this means that they are included in more than one row in the table.

Most common side effects reported in this study	**Men taking atezolizumab plus enzalutamide** (374 men in total)	**Men taking enzalutamide** (376 men in total)
Feeling tired	35%	28%
Not wanting to eat (less appetite)	32%	27%
Low level of red blood cells	24%	15%
Feeling sick (nausea)	23%	18%
Low energy levels	23%	17%
Diarrhoea	23%	11%
Back pain	22%	15%
Constipation	21%	16%
Joint pain	19%	13%
Rash	14%	3%
Weight loss	13%	8%

Other side effects

You can find information about other side effects (not shown in the sections above) on the websites listed at the end of this summary – see section 8.

6. How has this study helped research?

The information presented here is from one study of 750 men with prostate cancer that has spread to other parts of the body. These results helped researchers learn more about prostate cancer and treatment with atezolizumab plus enzalutamide.

So far the study has shown that:

- Men in **Group A** lived for around 15 months on average from the start of the study, compared to around 17 months on average for men in **Group B**
- In **Group A**, 136 out of 374 men (36%) had at least one severe side effect compared with 83 out of 376 men (22%) in **Group B**.

- In **Group A**, 16 out of 374 men (4%) and in **Group B**, 12 out of 376 men (3%) died due to side effects that occurred while they were taking the study drugs.
- The most common side effects in **Group A** were feeling tired (35%), not wanting to eat (32%), low level of red blood cells (24%), feeling sick (23%), low energy levels (23%), diarrhoea (23%), back pain (22%), and constipation (21%).
- The most common side effects in **Group B** were feeling tired (28%), not wanting to eat (27%), joint pain (13%), feeling sick (18%), low energy levels (17%), constipation (16%), back pain (15%), and low level of red blood cells (15%).

You should not make decisions based on this one summary – always speak with your doctor before making any decisions about your treatment.

7. Are there plans for other studies?

At the moment, there are no plans for more studies looking at the combination of atezolizumab plus enzalutamide in people with prostate cancer.

8. Where can I find more information?

You can find more information about this study on the websites listed below:

- https://clinicaltrials.gov/ct2/show/NCT03016312
- https://www.clinicaltrialsregister.eu/ctr-search/search?query=2016-003092-22
- https://forpatients.roche.com/en/trials/cancer/prostate-cancer/a-study-of-atezolizumab--anti-pd-l1-antibody--in-combination-wit.html

If you want to find out more about the results of this study, the full title of the scientific paper we described here is: "IMbassador250: a randomised phase 3 trial comparing atezolizumab with enzalutamide vs enzalutamide alone in patients with metastatic castration-resistant prostate cancer". The authors of the scientific paper are: Thomas Powles, Kobe C. Yuen, Silke Gillessen, Edward E. Kadel III, Dana Rathkopf and others. The paper is published in the journal *Nature Medicine*, published online 10 January 2022 (doi: 10.1038/s41591-021-01600-6).

Who can I contact if I have questions about this study?

If you have any more questions after reading this summary:

- Visit the ForPatients platform and fill out the contact form – https://forpatients.roche.com/en/trials/cancer/prostate-cancer/a-study-of-atezolizumab--anti-pd-l1-antibody--in-combination-wit.html
- Contact a representative at your local Roche office.

If you took part in this study and have any questions about the results:

- Speak with the study doctor or staff at the study hospital or clinic.

If you have questions about your own treatment:

- Speak with the doctor in charge of your treatment.

Who organised and paid for this study?

This study was organised and paid for by F. Hoffmann-La Roche Ltd who have their headquarters in Basel, Switzerland.

Full title of the study and other identifying information

The full title of this study is: “A Study of Atezolizumab (Anti-PD-L1 Antibody) in Combination With Enzalutamide in Participants With Metastatic Castration-Resistant Prostrate Cancer (mCRPC) After Failure of an Androgen Synthesis Inhibitor And Failure of, Ineligibility For, or Refusal of a Taxane Regimen (IMbassador250)”.

The study is known as ‘IMbassador250’.

- The protocol number for this study is: CO39385.
- The ClinicalTrials.gov identifier for this study is: NCT03016312.
- The EudraCT number for this study is: 2016-003092-22.