Summary of Clinical Trial Results

IPATunity130 (Cohort A): A study of ipatasertib compared with placebo, both given with chemotherapy, in people with a type of breast cancer called 'advanced triple-negative breast cancer' whose tumours have certain gene changes

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

About this summary

This is a summary of the results of the IPATunity130 Cohort A clinical trial (called a 'study' in this document) – written for:

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

This summary is based on information known at the time of writing (May 2022).

The IPATunity130 study looked at people with 2 different types of breast cancer. This summary has results from the part of the study which looked at people with a type of cancer called triple-negative breast cancer (TNBC).

This part of the study (called 'Cohort A') started in February 2018 and will end by June 2023. This summary includes the results that were analysed in May 2020. At the time of writing this summary, the study was being closed.

One study can't tell us everything about how safe a medicine is and how well it works. It takes lots of people in many studies to find out everything we need to know. The results from this study may be different from results from other studies of the same medicine.

This means that 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

Glossary

- **TNBC** – triple-negative breast cancer

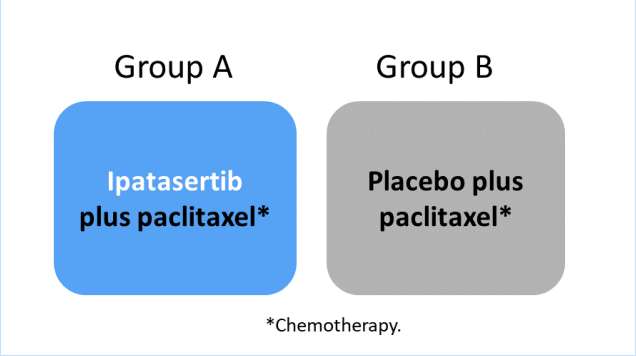
Thank you to the people who took part in this study

The people who took part in this study have helped researchers answer important questions about advanced TNBC and the medicine being studied – 'ipatasertib' – taken together with chemotherapy.

Key information about this study (IPATunity130 Cohort A)

Why was this study done?

- This study was done to compare how 2 combinations of drugs worked in people with a type of breast cancer called locally advanced TNBC.
- The 2 combinations were:
    - The medicine being studied – called '**ipatasertib**' – taken together with a commonly used chemotherapy called '**paclitaxel**'
    - **Placebo** taken with a commonly used chemotherapy (**paclitaxel**).
- People were divided into 2 study groups as shown here, so that the effects of the different combinations of medicines could be compared.



- This study included 255 people in 30 countries.

What were the results?

- The main findings were that:
    - For the people in **Group A,** their cancer did not get worse for 7.4 months on average after starting the treatment.
    - For the people in **Group B**, their cancer did not get worse for 6.1 months on average after starting the treatment.
    - In Group A and Group B, it took about the same amount of time for the cancer to get worse. This shows researchers that adding ipatasertib to chemotherapy does not help to stop the cancer from getting worse compared to being treated with chemotherapy alone.

How many people had serious side effects due to study medicines?

- About 13% of people (21 out of 166 people) in **Group A** had serious side effects due to their treatment, compared with about 7% of people (6 out of 87 people) in **Group B**.
- At the time of writing this summary, the study is being closed.

1. General information about this study

Why was this study done?

Doctors now use information about breast cancer cells to sort breast cancers into different types to help them decide which treatments will work best. People in this study had a type of breast cancer called TNBC, which means that their cancer cells do not have receptors for the hormone oestrogen, the hormone progesterone or the human epidermal growth factor receptor 2 (HER2) protein. These receptors bind to oestrogen, progesterone or HER2 and then send a message to the cell. Although other types of breast cancers can be treated with therapies that target these receptors, these therapies do not work in TNBC.

Chemotherapy is another type of treatment for breast cancer that kills cancer cells and stops the cancer from growing. However, chemotherapy may work for only a short time and then the cancer gets worse again. Also, in some people, the cancer still grows even with treatment.

This means that new medicines are needed to be able to treat the cancer more effectively – by stopping the growth of the tumour or shrinking the tumour – and to help people live longer. If the tumour stops growing or shrinks, people may also be able to manage their cancer better.

A medicine called 'ipatasertib' is a type of cancer drug called a 'growth blocker'. It works by blocking a protein called 'AKT', which is part of a family of proteins that help cancer cells grow. Everyone has AKT in their body. In some types of breast cancer, changes (called 'mutations') in AKT, or other proteins of this family, make it work differently. These changes can help the cancer grow. However, one study, in a different type of breast cancer, showed that these changes may help ipatasertib plus chemotherapy to work better.

All the people who took part in this study had TNBC, which includes changes in AKT, or other members of this protein family, and also changes in *PIK3CA* and *PTEN*. These changes were found by testing a piece of the tumour.

In this study, researchers wanted to see how well the combination of ipatasertib with chemotherapy (paclitaxel) worked in people with this type of cancer. They wanted to see if this combination would slow down how long it took for the cancer to get worse – and help these people to live longer – compared to chemotherapy on its own. For people in this study, treatment with chemotherapy (paclitaxel) was their first treatment since being diagnosed with this type of breast cancer.

What were the medicines being studied?

The medicine being studied in IPATunity130 is '**ipatasertib**':

- You say this as 'eye – pat – a – sert – ib'.
- Ipatasertib is a cancer drug called a 'growth blocker'. It works by blocking a protein called 'AKT' that helps cancer cells grow.

Ipatasertib was compared to a **placebo:**

- You say this as 'plah – see – bo'.
- The placebo looks the same as ipatasertib but does not contain any real medicine. This means that it does not have any medicine-related effects on the body.
- The researchers gave all the people the chemotherapy (paclitaxel). Some people got extra medicine (ipatasertib), and some people did not (placebo). So, the researchers could see which benefits or side effects are caused by ipatasertib.

The existing **chemotherapy** medicine used in this study was '**paclitaxel**':

- You say this as 'pac-lee-tax-el'.
- Paclitaxel works by stopping cancer cells from dividing into new cells, so it blocks the growth of the tumour.

What did researchers want to find out?

- Researchers did this study to compare ipatasertib plus paclitaxel with placebo plus paclitaxel – to see how well ipatasertib plus paclitaxel worked (see section 4 "What were the results of the study?").
- Researchers also wanted to find out how safe the medicines were – by checking how many people had side effects and how serious they were, when taking each of the medicines in the study (see section 5 "What were the side effects?").

The main question that researchers wanted to answer was:

1. In **Group A** and **Group B**, how much time was there between the start of treatment and the cancer getting worse?

What kind of study was this?

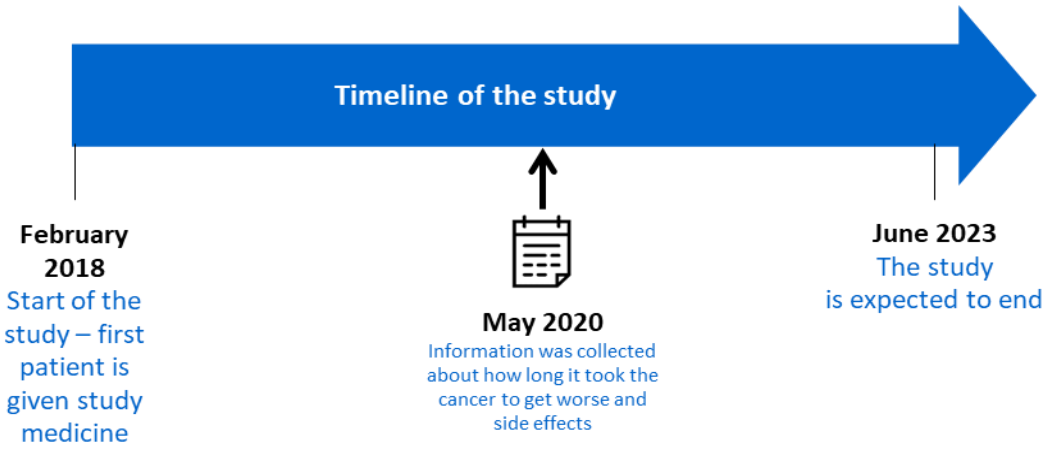
This study was a '**Phase 3**' study. This means that before this study started, ipatasertib plus paclitaxel had been tested in a smaller number of people with advanced breast cancer. In this study, a larger number of people with advanced TNBC received either ipatasertib plus paclitaxel (Group A) or placebo plus paclitaxel (Group B). This was to find out if adding ipatasertib to paclitaxel helped to delay the cancer from getting worse.

This study was a '**randomised controlled**' study. This means that it was decided by chance which of the 2 treatment options (Group A or B) people in the study would be given, like tossing a coin. For every person that was put into the placebo plus paclitaxel

group, 2 people were put into the ipatasertib plus paclitaxel group. Deciding by chance which group people will be in makes it more likely that the types of people in both groups will be a similar mix (for example, similar ages, similar races). Other than the different medicines given in each group, all other care was the same.

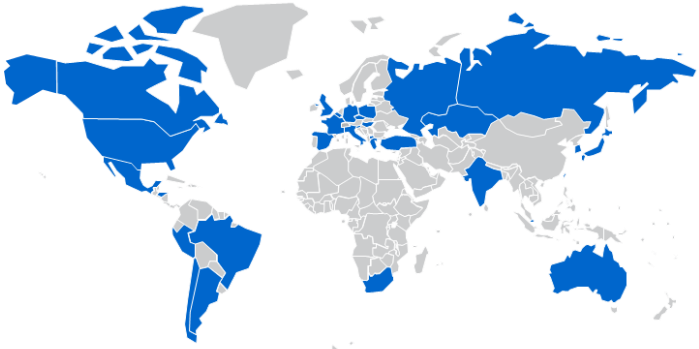
When and where did the study take place?

The study started in February 2018 and is expected to end by June 2023. This summary includes the results up until May 2020.



The symbol on the timeline (📋) shows when the information shown in this summary was analysed (May 2020 – 2.5 years after the study started).

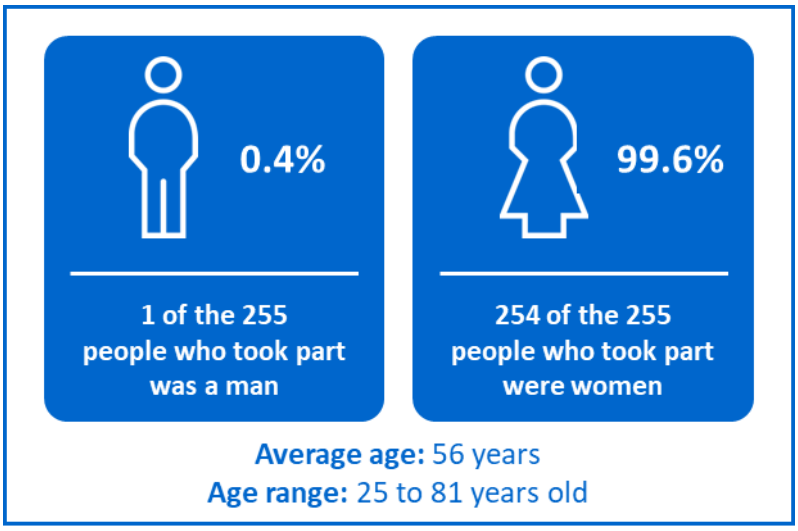
The study took place at 107 hospitals and clinics in 30 countries. This map shows the countries where this study took place.



- Australia
- Argentina
- Belgium
- Brazil
- Canada
- Chile
- Costa Rica
- Czech Republic
- France
- Germany
- Greece
- Hungary
- India
- Italy
- Japan
- Macedonia
- Mexico
- Peru
- Poland
- Republic of Korea
- Russian Federation
- Singapore
- Slovenia
- Spain
- South Africa
- Taiwan
- Turkey
- Ukraine
- United Kingdom
- United States

2. Who took part in this study?

In this study, 255 people with TNBC with certain gene changes in their tumour tissue took part. Here is more information about the people who took part in the study.



People could take part in this study if they:

- Had triple-negative breast cancer
- Had breast cancer that had spread from where it started to nearby cells or to other parts of the body
- Had breast cancer with changes (mutations) in the genes called *PIK3CA*, *AKT* and *PTEN*
- Allowed the doctor to take samples of their tumour(s)

People could NOT take part in this study if they:

- Previously had chemotherapy for advanced breast cancer
- Taken a medicine that works in a similar way to ipatasertib
- Cancer that spread to the brain or spinal cord
- Other types of cancer in the 5 years before the start of the study
- Had certain health problems, including a history of liver disease, inflammatory bowel disease, or heart problems

3. What happened during the study?

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

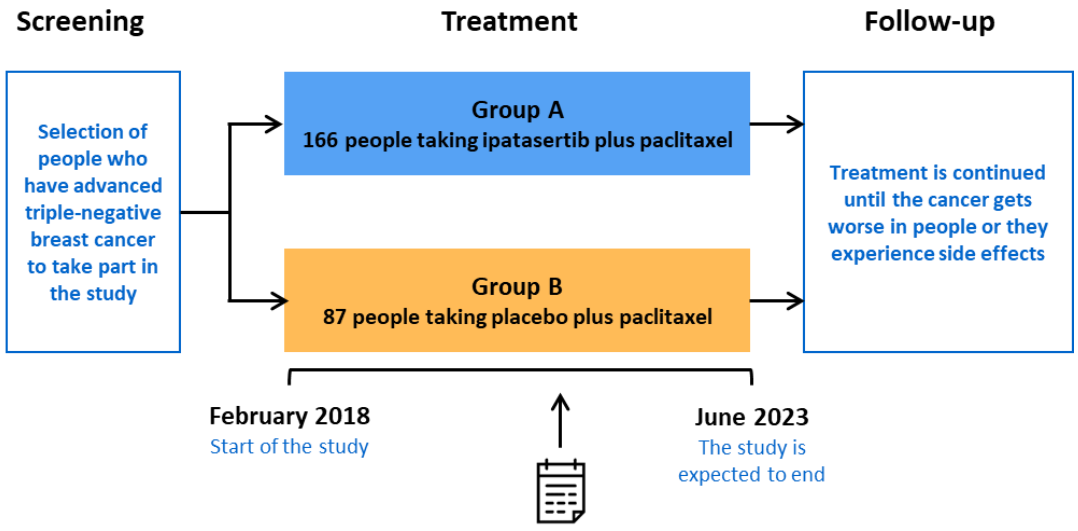
The treatment groups were:

- **Group A:** ipatasertib (new medicine) plus paclitaxel (existing chemotherapy)
- **Group B:** placebo plus paclitaxel (existing chemotherapy)

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

	Group A Ipatasertib plus paclitaxel	**Group B Placebo plus paclitaxel**
Number of people in each group (chosen by computer)	168	87
Number of people who actually took the medicines	166	87
How the drugs were taken	Ipatasertib: tablet taken by mouth Paclitaxel: injected into a vein	Placebo: tablet taken by mouth Paclitaxel: injected into a vein
When the drugs were taken in each 4-week treatment cycle	Ipatasertib: daily (days 1-21) Paclitaxel: days 1, 8, 15	Placebo: daily (days 1-21) Paclitaxel: days 1, 8, 15

The study is being closed. Look below to see more information about what happened in the study and the different study periods.



The symbol on the timeline (📋) shows when the information shown in this summary was analysed (May 2020 – about 2.5 years after the study started).

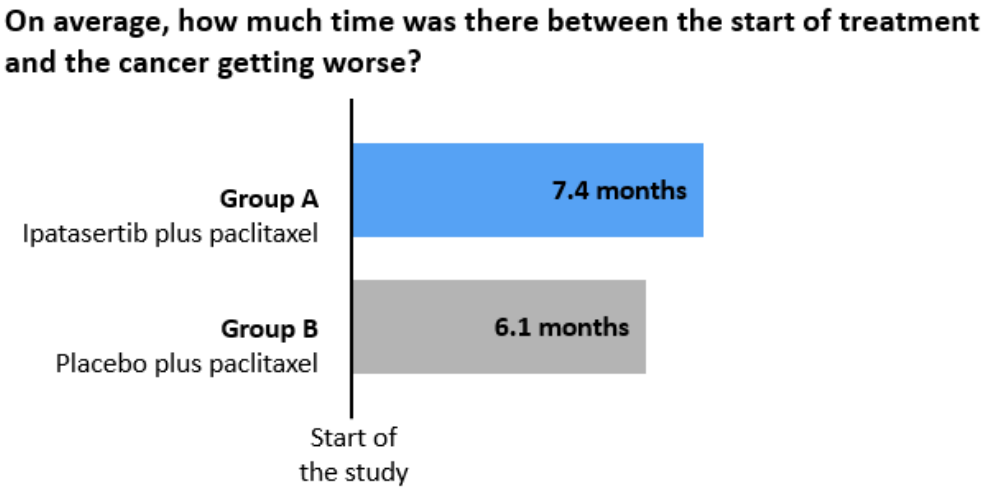
4. What were the results of the study?

Question 1: In **Group A** and **Group B**, how much time was there between the start of treatment and the cancer getting worse?

After starting the medicine, people in **Group A** and **Group B** were monitored for about 8 months on average.

Researchers looked at how much time there was before the cancer got worse (in other words, spread, spread further, or grew larger) in **Group A** and **Group B**.

- In **Group A**, the cancer got worse after about 7.4 months on average (in some people it took longer to get worse and in others it got worse sooner than 7.4 months).
- In **Group B**, the cancer got worse after about 6.1 months on average (in some people it took longer to get worse and in others it got worse sooner than 6.1 months).



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?

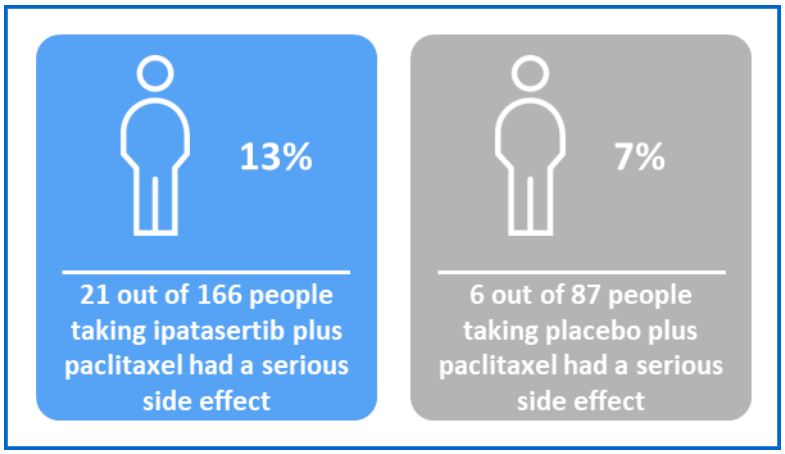
Side effects are medical problems (such as feeling dizzy) that may happen during the study.

- The side effects described in this summary are included because the study doctor believes they were related to the medicines in the study.
- Not all of the people in this study had all of the side effects.
- Side effects may be mild to severe.
- Side effects can be 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 in the medicine leaflets.
- Serious and common side effects are listed in the following sections.

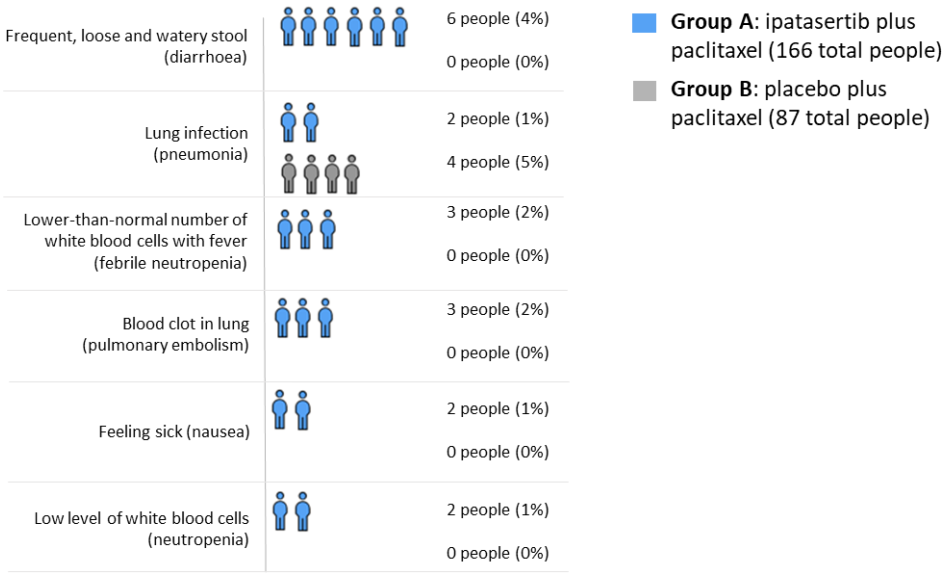
Serious side effects

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

During this study, 11 out of every 100 people (11%) had at least one serious side effect that was due to the medicines being taken (ipatasertib, placebo, and paclitaxel). The number of people who had serious side effects in each group due to the medicines taken are shown below.



This picture shows the serious side effects due to the study medicines that happened in more than 2 people in either the ipatasertib plus paclitaxel group or the placebo plus paclitaxel group – these are the most common serious side effects in both treatment groups.

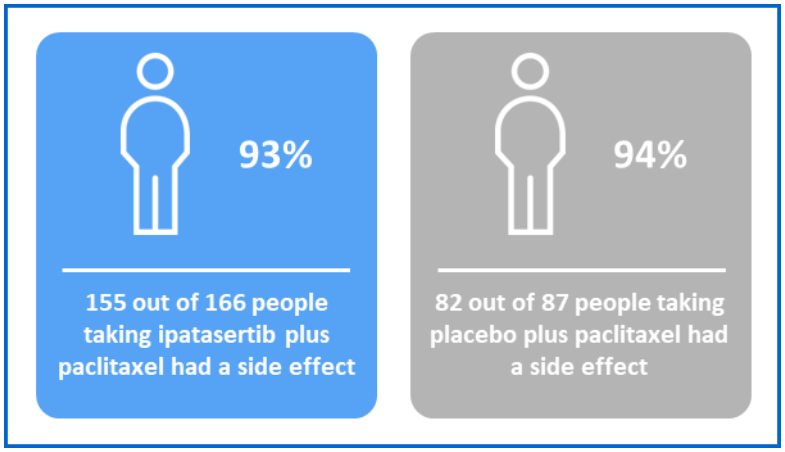


Some people in the study died due to side effects which the study doctor believed were due to one of the study medicines:

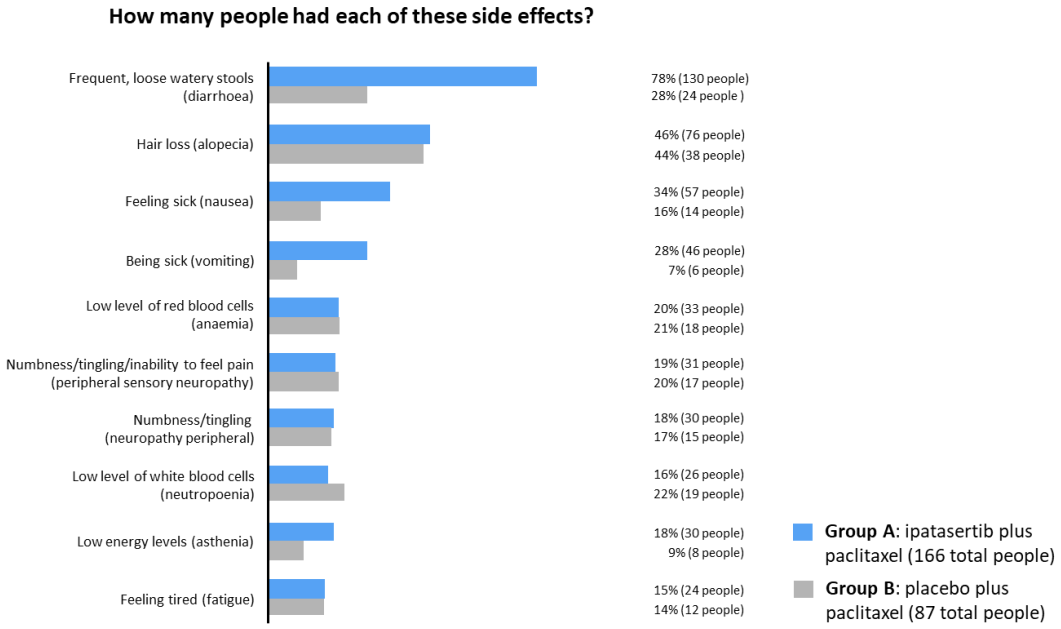
- 2 out of 166 people (1%) in **Group A** died.
- 1 out of 87 people (1%) in **Group B** died.

Most common side effects

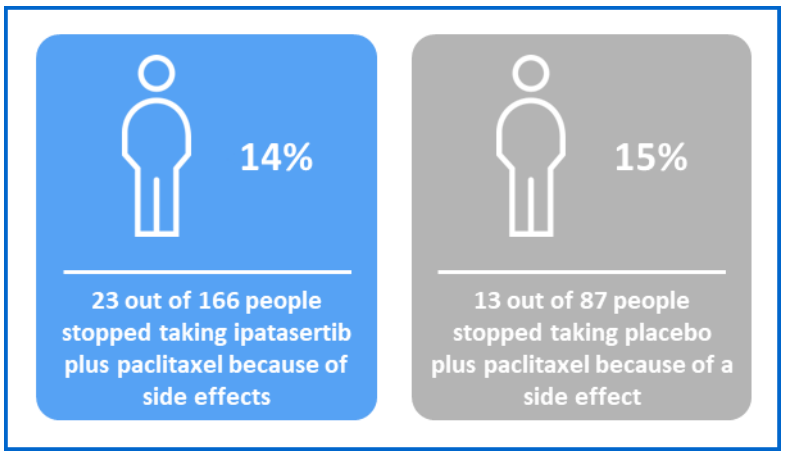
During this study, 94 in every 100 people (94%) had at least one side effect (serious or not) that was due to the medicines being taken (ipatasertib, placebo, and paclitaxel). The number of people in each group who had side effects due to the medicines taken is shown below.



This graph shows the most common side effects due to the medicines that were taken. These are the 10 most common side effects across both treatment groups. Some people had more than one side effect.



During the study, some people decided to stop taking their medicine because of side effects. This is shown below.



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 in this summary is from one study of 255 people with TNBC that had spread to other parts of the body. These results helped researchers learn more about this type of breast cancer and treatment with ipatasertib. These results helped researchers learn more about how well ipatasertib plus paclitaxel works to treat this type of breast cancer and how safe it is.

Ipatasertib works by blocking a protein called 'AKT', which works together with other proteins, such as PI3KCA and PTEN, to help cancer cells grow. Everyone has PI3KCA, AKT and PTEN in their body. In some types of breast cancer, changes (called 'mutations') in PI3KCA, AKT and PTEN make them work differently. These changes can help the cancer grow. Researchers wanted to learn if people who were given ipatasertib plus paclitaxel for TNBC that had spread to nearby cells or other parts of the body were less likely to have their cancer get worse than people given placebo plus paclitaxel. In particular, people whose tumours had cells with mutations in PI3KCA, AKT and PTEN were more likely to benefit from the combination of ipatasertib plus paclitaxel. Researchers were not able to show that people given ipatasertib plus paclitaxel lived longer than people given placebo plus paclitaxel.

People who were given ipatasertib plus paclitaxel had more serious side effects due to the study medicine than the people who were given paclitaxel plus placebo. The people in this study did not have any new side effects that had not been seen before in people who took ipatasertib or paclitaxel in other studies.

7. Are there plans for other studies?

Other studies looking at the safety and effects of ipatasertib are happening. These studies are looking at the use of ipatasertib in different situations, for example:

- Together with other treatments
- In other types of breast cancer, including 'hormone receptor-positive, HER2-negative'
- In other types of cancer, including prostate cancer

8. Where can I find more information?

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

- https:// https://clinicaltrials.gov/ct2/show/NCT03337724
- https://www.clinicaltrialsregister.eu/ctr-search/trial/2017-001548-36
- https://forpatients.roche.com/en/trials/cancer/bc/a-study-of-ipatasertib-in-combination-with-paclitaxel-as-a-treat.html

- Dent et al. Cancer Res 2021;81(4_Supplement): GS3-04. https://doi.org/10.1158/1538-7445.SABCS20-GS3-04

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/bc/a-study-of-ipatasertib-in-combination-with-paclitaxel-as-a-treat.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 Ipatasertib in Combination With Paclitaxel as a Treatment for Participants With PIK3CA/AKT1/PTEN-Altered, Locally Advanced or Metastatic, Triple-Negative Breast Cancer or Hormone Receptor-Positive, HER2-Negative Breast Cancer (IPATunity130)”.

The study is known as ‘IPATunity130’.

- The protocol number for this study is: CO40016.
- The ClinicalTrials.gov identifier for this study is: NCT03337724.
- The EudraCT number for this study is: 2017-001548-36.