How well does elranatamab work as a treatment for multiple myeloma compared to teclistamab?

The full title of this abstract is: Updated Results of a Matching-Adjusted Indirect Comparison of Elranatamab Versus Teclistamab in Patients With Triple-Class Exposed/Refractory Multiple Myeloma

VIEW ABSTRACT

View Scientific Abstract >

Date of summary:
November 2024

Please note this summary only contains information from the scientific abstract. See a summary of the final poster presentation here.

Study number: NCT04649359, NCT04557098

Study start date:	**Study end date:**
MagnetisMM-3: February 2021	December 2025
MajesTEC-1: September 2020	September 2025

For more information on this study, go to:
https://www.clinicaltrials.gov/study/NCT04649359
https://www.clinicaltrials.gov/study/NCT04557098

KEY TAKEAWAY

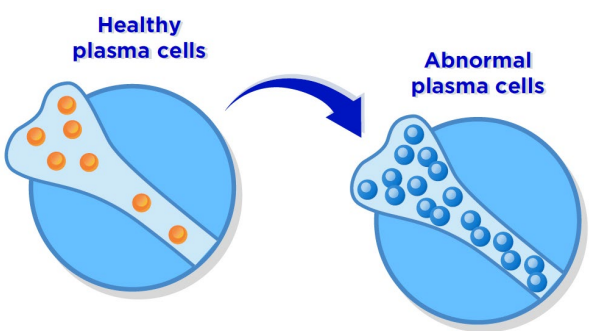
What are the key takeaways from this study?

- People with multiple myeloma who were given ELREXFIO™ (**elranatamab**) in the global **MagnetisMM-3** clinical study may have done better than those who were given **teclistamab** in the global **MajesTEC-1** study
  - People who were given **elranatamab** had a lower risk of their myeloma getting worse
  - People who were given **elranatamab** had a better chance of living longer

INTRODUCTION

What is multiple myeloma?

- Multiple myeloma is a blood cancer that affects a type of white blood cell known as a **plasma cell** in the **bone marrow**
  - Healthy plasma cells make proteins called **antibodies** that help fight infections
- Multiple myeloma leads to the buildup of abnormal plasma cells in the bone marrow, which:
  - Stop the body from making normal number healthy blood cells, often causing anemias (low red blood cells)
  - Make abnormal antibodies (also called **M proteins**)
  - Interfere with the normal function of kidneys and affect bone health

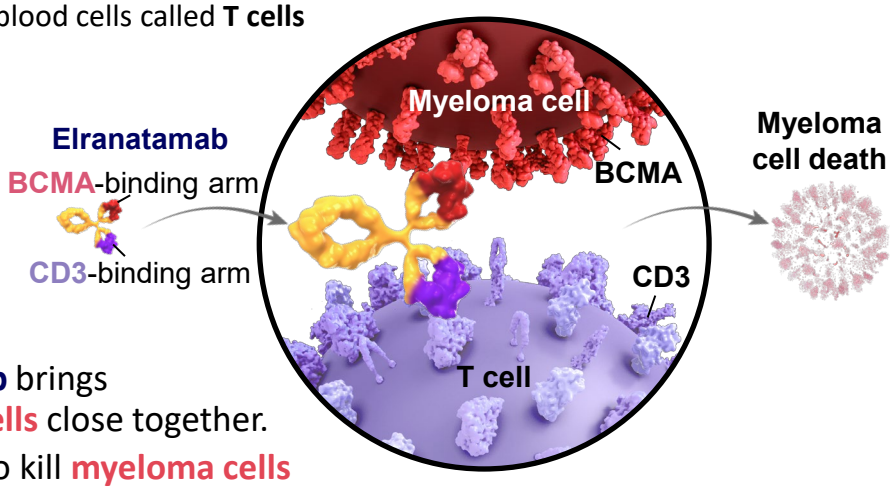


What is multiple myeloma?

- At this time, there is no cure for multiple myeloma, but current treatments can help people manage the disease
- For some people, a treatment can stop myeloma growth for a while, but eventually it will start to grow again. When this happens, we say the disease has **relapsed** after treatment
- In some people with multiple myeloma, the cancer does not respond to treatment at all
  - This is known as **refractory** multiple myeloma
  - People who have **refractory** multiple myeloma don't have good responses to treatment

What is elranatamab?

- **Elranatamab** is a medication being studied in people with multiple myeloma who have received 3 other types of therapy including a proteasome inhibitor, an immunomodulatory agent, and an anti-CD38 antibody
- In August of 2023, **elranatamab** was approved by the FDA for the treatment of adults with myeloma who have received at least 4 prior lines of therapy, including 1 of each of the therapy types listed above
- **Elranatamab** works by attaching to 2 proteins known as **BCMA** and **CD3**
  - BCMA is found on plasma cells, including myeloma cells
  - CD3 is found on white blood cells called **T cells**



Elranatamab brings
T cells and myeloma cells close together.
It helps activate T cells to kill myeloma cells

What is teclistamab?

- **Teclistamab** also works by attaching to BCMA and CD3 to bring plasma cells and T cells close together
- In October of 2022, it was approved by the FDA for the treatment of adults with myeloma who have received at least 4 prior lines of therapy, including **a proteasome inhibitor**, an **immunomodulatory agent**, and an **anti-CD38 antibody**

What does this summary describe?

- This summary describes an analysis compared the results for in the **MagnetisMM-3** study (which looked at **elranatamab**) to results for people in the **MajesTEC-1** study (which looked at **teclistamab**)
- These treatments were not compared in the same study, so results from 2 different studies were used

INTRODUCTION

Researchers wanted to find out…

- Does a person's myeloma improve when they are given **elranatamab**?
- Does myeloma improve more when people are given **elranatamab** than when they are given **teclistamab**?

STUDY DETAILS

Who took part in this study?

This study looked at people whose multiple myeloma was previously treated with and may have stopped responding to 3 types of medicine for myeloma:

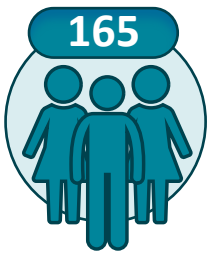
Anti-CD38 antibodies help the body's defense system (the immune system) to recognize and kill myeloma cells

Proteasome inhibitors cause proteins to build up within the myeloma cells and cause these cells to die

Immunomodulatory medicines stimulate or suppress the immune system to help the body fight cancer

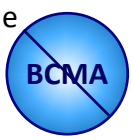
These people have **triple-class exposed or refractory multiple myeloma**

people with triple-class *refractory* multiple myeloma from **MagnetisMM-3** treated with **elranatamab**



people with triple-class *exposed* multiple myeloma from **MajesTEC-1** treated with **teclistamab**

- People in both studies had never been treated with a medicine that targets the BCMA protein
- 7 people from the **MagnetisMM-3** study were not included because of differences in how people were chosen for the 2 studies
- Information about the characteristics of the people from **MagnetisMM-3** was adjusted so that the results of the people in the 2 studies could be compared



STUDY DETAILS

MagnetisMM-3

≈28 months

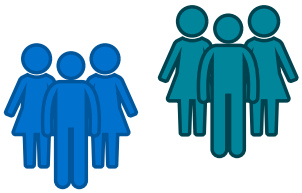
People in the study were monitored for different lengths of time after starting treatment

MajesTEC-1

≈30 months

RESULTS

What were the results of this study?



In <u>all</u> patients who had never been given a medicine that targets the BCMA protein from both studies…

MagnetisMM-3 *compared to* **MajesTEC-1**

44%
less likely to have their myeloma stop responding to treatment

Duration of response
Myeloma in people who were given **elranatamab** responded to treatment for a significantly longer time than myeloma in people who were given **teclistamab**

45%
less likely to have their myeloma get worse

Progression-free survival
People who were given **elranatamab** had a significantly longer time without their myeloma getting worse than people who were given **teclistamab**

40%
lower risk of death while on treatment

Overall survival
People with multiple myeloma who were given **elranatamab** were alive for a significantly longer time than people who were given **teclistamab**

In a subgroup of people with multiple myeloma that could not be detected in the blood or urine after treatment, people in MagnestisMM-3 as compared to MajesTEC-1

- **Were 72% less likely to have their myeloma stop responding to treatment**
- **Were 72% less likely to have their myeloma get worse**
- **Had a 65% lower risk of death**

CONCLUSIONS

What were the main conclusions of this study?

- Compared to people who were given **teclistamab** in the **MajesTEC-1** study, people who were given **elranatamab** in the **MagnetisMM-3** study had a longer time when their myeloma responded to treatment, were less likely to have their myeloma get worse, and had a better chance of living longer
- **Elranatamab** is a treatment option that works well for people who have triple-class refractory multiple myeloma

MORE INFORMATION

Who sponsored the study?

This study was sponsored by Pfizer Inc.

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New York, NY 10001
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The sponsor thanks everyone who took part in this study.

- This summary makes an indirect comparison of 2 studies
  - The results of these studies may differ from those of other studies
  - Health professionals should make treatment decisions based on all available evidence, not just on the results of individual studies
  - The studies described are still ongoing; therefore, the final outcomes of these studies may differ from the outcomes described in this summary

Where can I find more information?

For more information on this study, please visit:

View Scientific Abstract >

MagnetisMM-3: https://www.clinicaltrials.gov/study/NCT04649359
MajesTEC-1: https://www.clinicaltrials.gov/study/NCT04557098

For more information on clinical trials in general, please visit:
https://www.clinicaltrials.gov/ct2/about-studies/learn
http://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/what-clinical-trials-are

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PHONETICS

Find out how to say medical terms used in this summary

Antibody
<AN-tee-BAH-dee>

Elranatamab
<ehl-RA-na-ta-mab>

Immunomodulatory
<IH-myoo-noh-MOD-you-lay-tory>

MagnetisMM
<MAG-nuh-ti-zuhm>

Myeloma
<MY-eh-LOH-muh>

Proteasome inhibitor
<PROH-tee-us-some in-HIH-bih-ter>

Refractory
<reh-FRAK-tor-ee>

Relapsed
<REE-lapst>

Teclistamab
<tek-LIS-tuh-mab>

GLOSSARY

accelerated approval: an official process that allows a new drug to be approved by the US
antibody: a protein the body's immune system makes to help fight infections
anti-CD38 antibodies: an immunotherapy protein that binds to the CD38 protein, which is abundant on the myeloma cell surface, and kills myeloma cells both directly and with the help of the immune system
BCMA: B-cell maturation antigen. A protein found on the surface of myeloma cells
BCMA-directed bispecific antibody: a monoclonal antibody that is engineered to simultaneously bind to two different cell surface proteins, one of which is BCMA
bone marrow: the soft, spongy tissue that is in most bones. This is where blood cells develop before moving into the bloodstream
duration of response: the length of time a person's myeloma responds to treatment
elranatamab: a medicine being studied by researchers as a treatment for people with multiple myeloma. This medicine is a BCMA-directed bispecific antibody
extramedullary disease: the presence of myeloma cells outside of the bone marrow
immune system: the body's defense system. It helps fight infections and cancer
immunomodulatory medicine: a medicine that stimulates or suppresses the immune system to help the body fight cancer
line of therapy: the order in which different therapies are given to people as their cancer gets worse. First-line therapy is the first cancer treatment a person receives. A person with 4 prior lines of therapy has received more treatments than a person with 2 prior lines of therapy
M protein: also called monoclonal protein; an antibody found in unusually large amounts in the blood or urine of people with multiple myeloma and other types of plasma cell tumors
multiple myeloma: a type of blood cancer that begins in the plasma cells
overall survival: the length of time a person lives with myeloma after starting a treatment
plasma cell: a type of white blood cell that makes large amounts of antibodies
progression-free survival: the length of time during and after the treatment that a person lives without their myeloma getting worse
proteasome inhibitors: medications that interfere with the cell's ability to break down and recycle unwanted proteins that cancer cells often accumulate excessively
refractory multiple myeloma: the state in which multiple myeloma does not respond or stops responding to treatment
relapsed multiple myeloma: the state in which the signs and symptoms of multiple myeloma reappear after a period of responding to therapy
T cell: a type of immune cell. T cells are part of the immune system and develop from stem cells in the bone marrow. They help protect the body from infection and may help fight cancer
teclistamab: a medicine being studied by researchers as a treatment for people with myeloma
white blood cell: a type of blood cell that is made in the bone marrow and is part of the body's immune system