DNA Damage Response Inhibitors (DDRi)

Phase 1 study: M9466 ± tuvusertib or AA-P—advanced solid tumors

DDRiver SOLID TUMORS 501

Merck KGaA, Darmstadt, Germany entered a collaboration with Jiangsu Hengrui Pharmaceuticals Co. Ltd., China, including an exclusive license worldwide (ex-China) to develop, manufacture and commercialize M9466/HRS-1167.
M9466 is investigational and not approved for use. The safety and efficacy of M9466 in advanced solid tumors has not been established.
There is no guarantee M9466 will be approved in the sought-after indication by any health authority worldwide.

Sponsor: Affiliates of Merck KGaA, Darmstadt, Germany

NCT06421935 [Recruiting]

DDRiver 501: Phase 1, open-label, multicenter study

Key eligibility criteria

Module 1 and 2

- Patients with locally advanced/metastatic solid tumors who received prior treatment with PARP inhibitors Or presence of DDR-relevant mutations (*BRCA1/2*, *PALB2*, *RAD51B/C/D*, *ATM*, *ARID1A*, *ATRX*, or HRD)
- ECOG PS 0-1
- Life expectancy >6 months
- Adequate hematologic function
- Patients with prior therapy[a] required a washout period of 4 weeks[b] or 5 half-lives, whichever is shorter, before initiating study intervention

Module 3

- Patients with metastatic[c] prostate cancer, including those with mCRPC and mHSPC
- Prior anti-cancer therapy for mCRPC and mHSPC[d]

N~96

Module 1 Part A1

M9466 + tuvusertib

Module 2 Part A1

M9466 monotherapy

Module 3 Part A1

M9466 + abiraterone acetate + prednisone/prednisolone

Endpoints

Primary	Module 1 Part A1: Safety (TEAEs, TRAEs, DLT) Module 2 Part A1: PK Module 3 Part A1: Safety (TEAEs, TRAEs, DLT)
Secondary	Module 1 Part A1: PK, OR[e], QTc interval Module 2 Part A1: TEAEs, TRAEs, ECG abnormalities, PK, PD[f] Module 3 Part A1: PK

Study start date
August 2024

Est. primary completion date
March 2026

Locations

Sites in US, Japan, Republic of Korea and Spain

Opening in Australia Q2 2025

[a]Chemotherapy, extensive radiotherapy, biological therapy (e.g. antibodies) or investigational agents; [b]6 weeks for nitrosourea, mitomycin-C; [c]Metastatic disease documented by positive bone scan or metastatic lesions on CT or MRI; [d]Prior anticancer therapy for mCRPC or mHSPC in sequential or combination not limited to ADT (chemical or surgical), ARPi (i.e., abiraterone acetate, apalutamide, or enzalutamide, darolutamide), taxane regimens, PARPi, lutetium-177-PSMA-617, and investigational drug.; [e]Per RECIST v 1.1 (as assessed by investigator); [f]PD biomarkers in paired tumor biopsies
AA-P, abiraterone acetate + prednisone/prednisolone; DLT, dose-limiting toxicity; ECG, electrocardiogram; ECOG PS, Eastern Cooperative Oncology Group performance status; mCRPC, metastatic castration-resistant prostate cancer; mHSPC, metastatic hormone-sensitive prostate cancer; OR, objective response; PARP, poly (ADP-ribose) polymerase; PD, pharmacodynamic; PK, pharmacokinetic; RECIST, Response Evaluation Criteria in Solid Tumors; TEAE, treatment-emergent adverse event; TRAE, treatment-related adverse event; US, United States of America.

For more information on this clinical trial, scan the QR code.

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