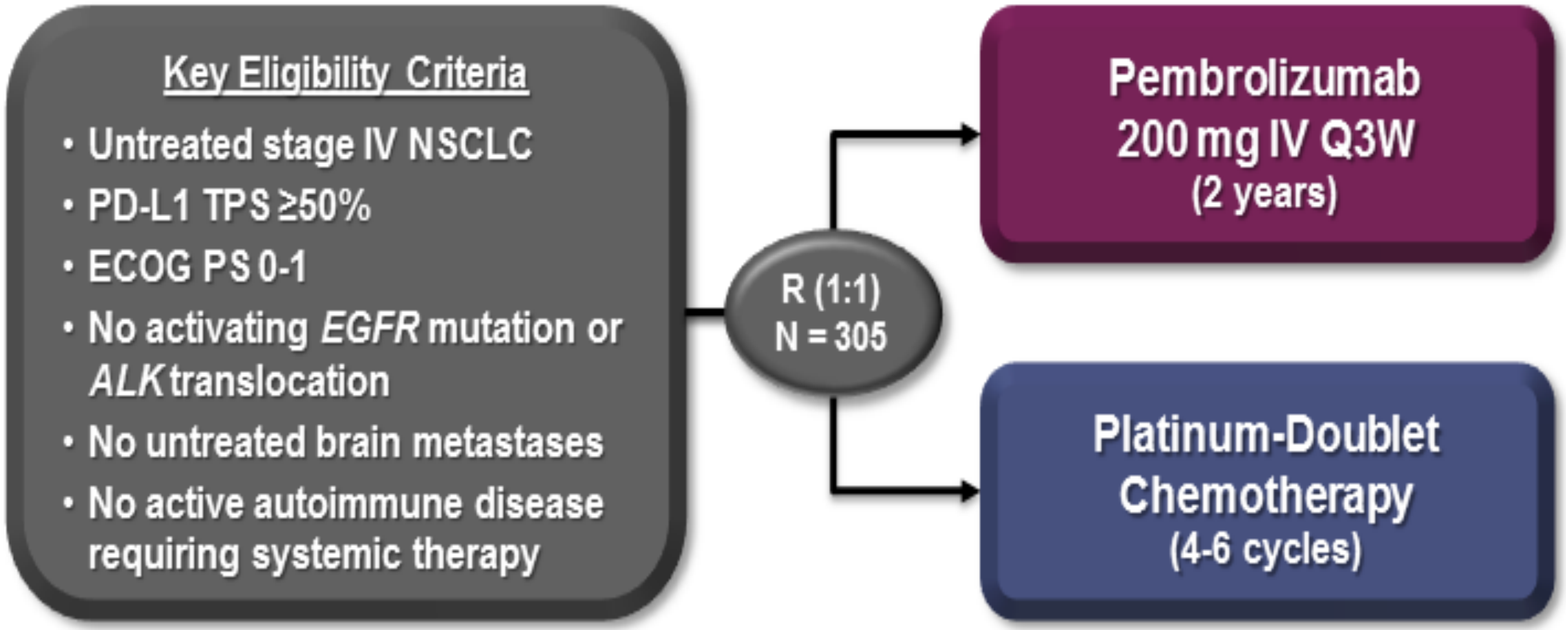
KEYNOTE-024

(PD1/PDL1-61)

KEYNOTE-024 Study Design (NCT02142738)



Key End Points

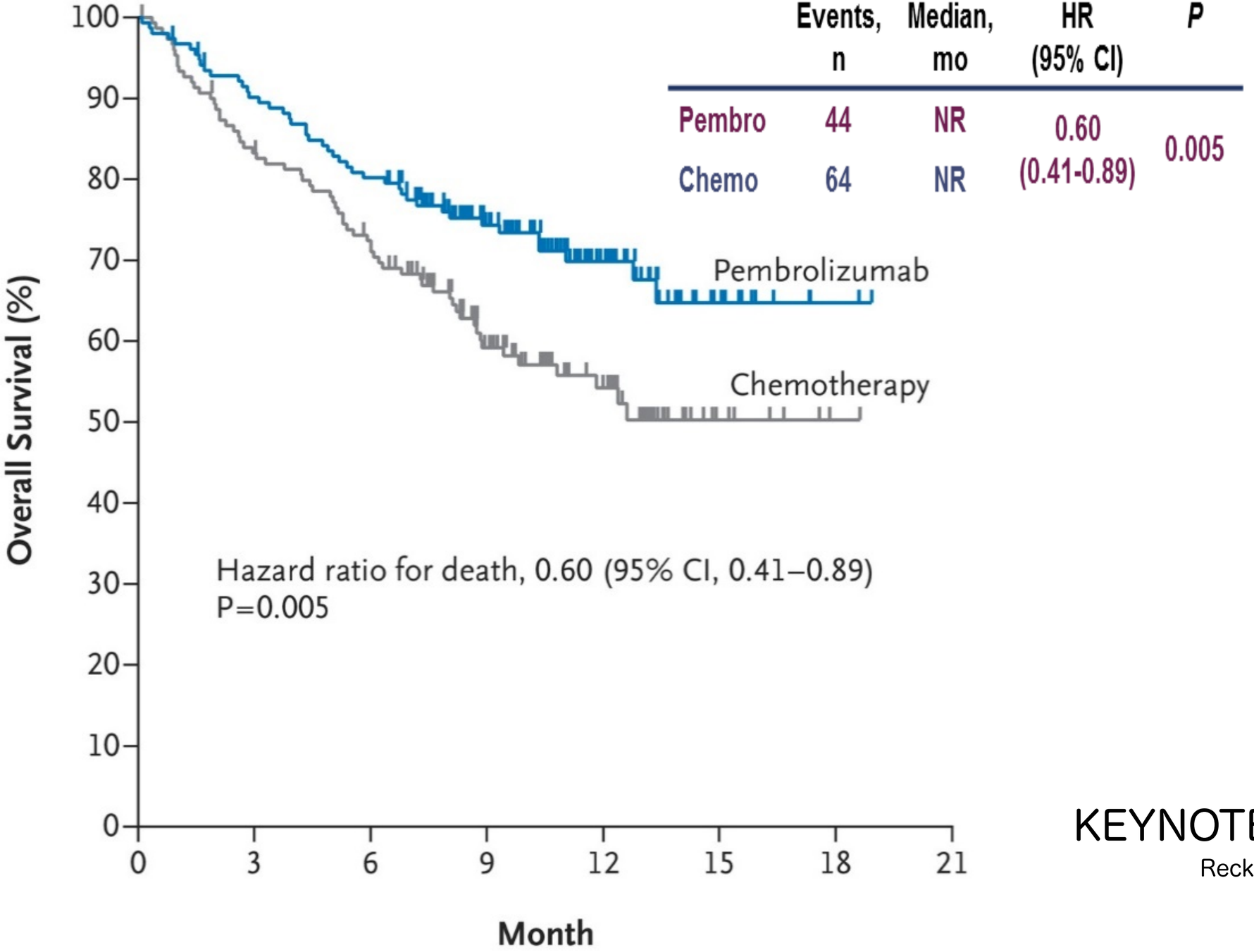
Primary: PFS (RECIST v1.1 per blinded, independent central review)

Secondary: OS, ORR, safety

Exploratory: DOR

KEYNOTE-024

Reck, NEJM, 2016



KEYNOTE-024

Reck, NEJM, 2016

KEYNOTE-024

Primary Endpoint: PFS

Secondary Endpoint: OR, ORR

非小細胞肺癌患者

All comer(腺癌、扁平上皮癌)

化学療法未治療の非小細胞肺癌
（１次治療）
・EGFR遺伝子変異　陰性
・ALK融合遺伝子　陰性
・PD-L１高発現
(TPS≧50%)

R

	PFS	PFS2	OS
Pembrolizumab	10.3ヵ月	18.3ヵ月	未達
	HR=0.50 p<0.001	HR=0.54 p<0.001	HR=0.63 p=0.003
Platinum-Doublet Chemotherapy	6.0ヵ月	8.4ヵ月	14.5ヵ月

CBDCA(AUC=5or6)+Pem(500mg/m2)　（Non-Sq Pem維持療法許容）
CDDP+Pem(500mg/m2)　（Non-Sq Pem維持療法許容）
CDDP+GEM(1000mg/m2)
CBDCA(AUC=5or6)+PTX(200mg/m2)　（Non-Sq Pem維持療法許容）

Up to 6 cycles

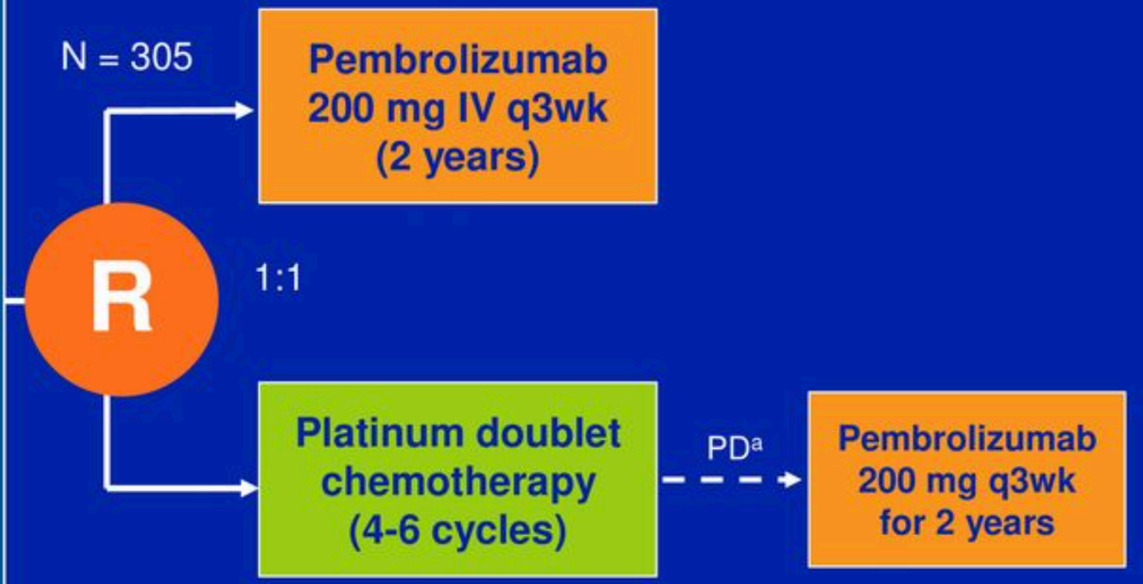
※化学療法群の後治療では、クロスオーバーでPembrolizumab使用が79/97例であったにも関わらず、OSにおいて一次での使用が成績良かった。１次治療で化学療法より優先してPembrolizumaを使用することとなる。

KEYNOTE-024 Study Design

NCT02142738

Key Eligibility Criteria

- Untreated Stage IV NSCLC
- PD-L1 TPS ≥50%
- ECOG PS 0-1
- No activating EGFR mutation or ALK translocation
- No untreated brain metastases
- No active autoimmune disease requiring systemic therapy



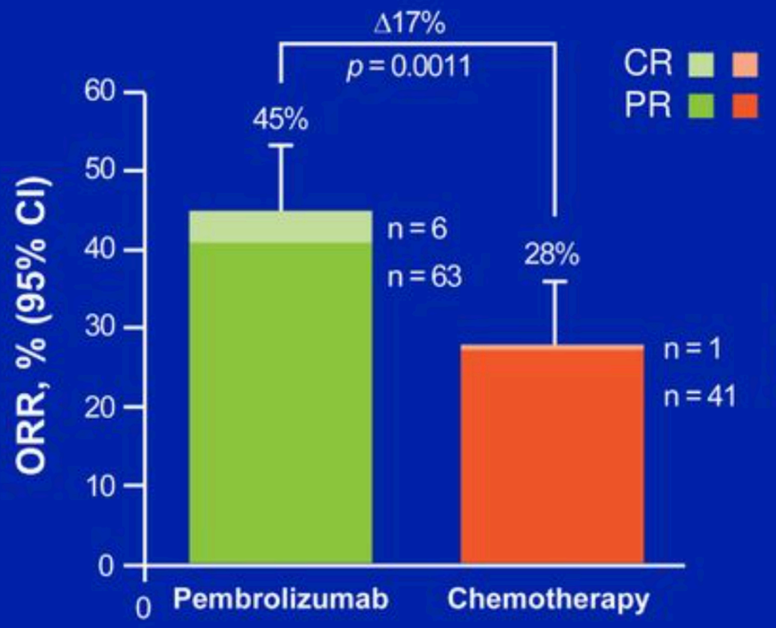
Key endpoints

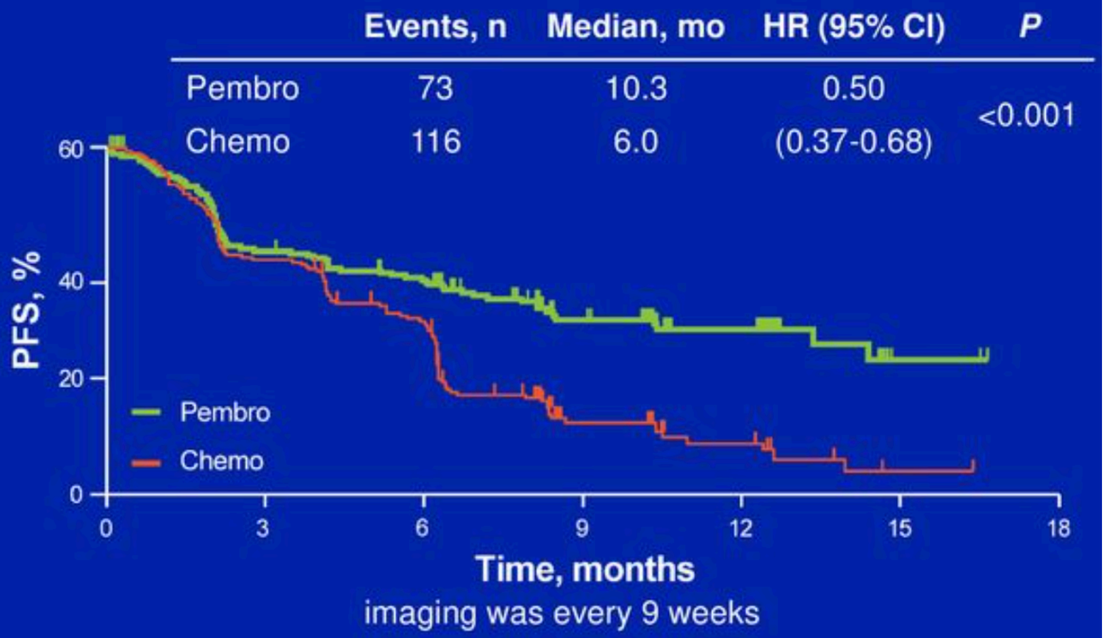
Primary: PFS (RECIST v1.1 per blinded, independent central review)

Secondary: OS, ORR, safety

Reck M et al. *N Engl J Med* 2016;375(19):1823-33.

KEYNOTE-024: Response and Progression-Free Survival





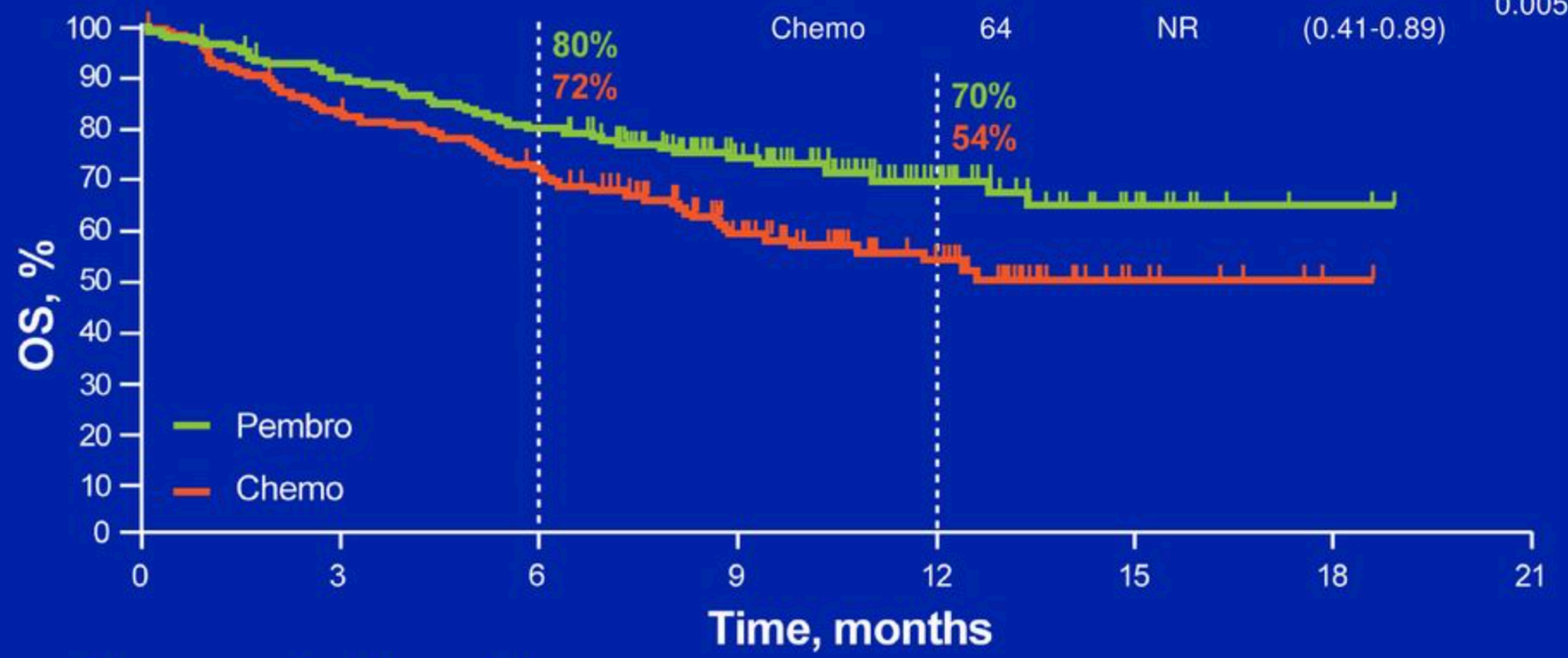
imaging was every 9 weeks

- ORR is improved, with a control arm that performs as expected (from other Phase III trials)
- **45% ORR is the best RR ever reported in 1st line setting (and with a monotherapy!)**
- Time to response is identical between pembrolizumab and chemotherapy
- **PFS is improved by 4.3 months** (**HR of 0.50**)
- Improvement of PFS in all subgroups (except female/never smokers)
- **Strongest signal of PFS benefit observed in SCC** (HR of 0.35)

Reck M et al. *N Engl J Med* 2016;375(19):1823-33, *Proc ESMO* 2016;Abstract LBA8_PR.

KEYNOTE-024: Overall Survival

	Events, n	Median, mo	HR (95% CI)	*P*
Pembro	44	NR	0.60 (0.41-0.89)	0.005
Chemo	64	NR		



Clear survival benefit

- Estimated rate of OS at 12 months: 70% (pembro) vs 54% (chemo)
- HR for death: **0.60**
- Crossover **was limited to 50% of the patients**

Reck M et al. *N Engl J Med* 2016;375(19):1823-33.

KEYNOTE-024: Select Adverse Events

Adverse event, n (%)	Pembrolizumab (N = 154)		Chemotherapy (N = 150)	
	All grades	Grade ≥3	All grades	Grade ≥3
Diarrhea	22 (14.3)	6 (3.9)	20 (13.3)	2 (1.3)
Fatigue	16 (10.4)	2 (1.3)	43 (28.7)	5 (3.3)
Pyrexia	16 (10.4)	0	8 (5.3)	0
Immune-mediated adverse event				
Any	45 (29.2)	15 (9.7)	7 (4.7)	1 (0.7)
Pneumonitis	9 (5.8)	4 (2.6)	1 (0.7)	1 (0.7)
Severe skin reaction	6 (3.9)	6 (3.9)	0	0
Colitis	3 (1.9)	2 (1.3)	0	0

Reck M et al. *N Engl J Med* 2016;375(19):1823-33.