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REAL-WORLD EXPERIENCE OF GLOFITAMAB IN REFRACTORY LYMPHOMAS- A COMPASSIONATE USE PROGRAM EXPERIENCE

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INTRODUCTION

- ✓ Diffuse large B cell lymphoma (DLBCL), the most common and aggressive NHL subtype, comprises 34 – 60% of NHL cases in India, with ~ 25,000 new cases annually (1,2).
- ✓ Despite standard therapies, 30 – 40% of patients relapse or are refractory, requiring ASCT or CAR-T (3).
- ✓ Glofitamab, a bispecific T cell engager, has shown promising results in phase 2 trials (4).

AIM

This study aims to report the outcomes from a compassionate use program (CUP) in refractory B-cell lymphoma.

METHOD

- ✓ Retrospective Study
- ✓ Adults (> 18 years) with B-cell lymphoma, ECOG <2, and ≥ 3 prior therapies
- ✓ Active CNS disease was excluded
- ✓ Glofitamab was given IV as step-up doses: 2.5 mg (Day 8), 10 mg (Day 15, Cycle 1), then 30 mg (Day 1, Cycle 2 – 12; 21-day cycles). Treatment continued for up to 12 cycles or until progression/toxicity.

RESULTS

- Total enrolled: 21 patients under the Glofitamab CUP program.
- 12 patients had disease progression before they could receive 1st dose of medicine.

- Treated patients: 9

- Median age: 50 years (range: 33 – 83)
- Gender: 7 males

- Disease & treatment history:

- 5 had extranodal, 3 had prior CAR-T therapy.
- Median prior therapy lines: 4 (range: 3 – 5)
- Median Glofitamab cycles: 5 (range: 1 – 12)

- Treatment regimens:

- Glofitamab monotherapy: 5
- Glofitamab + Acalabrutinib: 2
- Glofitamab + Polatuzumab +Gem-Ox: 1
- Glofitamab + HDMTX: 1

- Response evaluation:

- 2 patients expired before assessment.
- Among 7 evaluable patients:
  - ✓ Complete Response (CR) = 3
  - ✓ Progressive Disease (PD) = 4
- ORR at first assessment = 42.85%
- At 12-month follow-up: 2 remained in CR, and 1 underwent haplo-HSCT

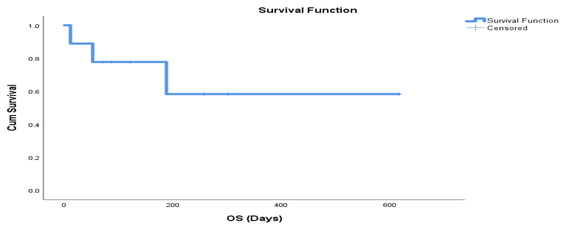


Fig. 1 Kaplan Meier Curve depicting the overall survival (OS) of the study cohort

- Safety Profile:

- CRS (≤ Grade 2) = 3 patients
- ICANS (> Grade 2) = 1 patient
- Infections = 5 patients
  - 1 required temporary treatment discontinuation.

- Survival data:

- Median OS: 121 days (range: 11 – 617)
- Alive at last follow-up = 6 patients

CONCLUSIONS

Glofitamab showed clinical activity and manageable toxicity in heavily pretreated, refractory B-cell lymphoma patients, supporting its potential as a treatment option in a real-world setting. In conclusion, Glofitamab must be further explored in combination with agents like Acalabrutinib or Polatuzumab to exploit its maximum potential.

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