Year 1, N°1

February 2018

NEWSLETTER REACH





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REACH launching

Dear Investigators,

The aim of the international phase III randomized study REACH is to determine the best first-line treatment in locally advanced inoperable head and neck cancer patients in terms of progression free survival.

Your contribution will be essential to meet the patients enrollment milestones and the study's primary endpoint.

REACH has already launched and progressing at a steady rythm thanks to your efforts. All safety centers are scheduled to be initiated by the end of march, and the remaining 40 centers by the end of the summer.

Pr Jean BOURHIS Study Global Coordinator

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IDSMB Meeting

01/02/2018

The IDSMB Meeting held in February, the 1st.

His responsibilities are:

- To guarantee the protection of the patients enrolled
- To ensure that the study conduct respects all ethical issues
- To ensure the independent review of scientific results during the study
- To assess the benefit/risks ratio

The 1st meeting aimed to review toxicity data of the 14th first patients treated in the experimental arms and assess the inclusion resumption (step 1 of the safety analysis).

It recommended:

- To resume study inclusions without any protocol modification at this step
- To record more precisely the reasons for treatment interruptions



Regulatory Update

Country	Planned sites	Planned site initiation by 08/2018	Site Initiated	Approval Status	Enrolled
France	50	50	11	Approved MSA2 pending (Ethical Committee)	33
Monaco	1	1	0	CCIN Pending -	
Switzerland	1	0	0	Not yet submitted	-

Our 2018 study milestones are to:

- \Rightarrow Run the 2 last safety centers after the 2nd step of safety phase: ICM and Institut Curie
- ⇒ End the safety phase by end of Spring 2018.
- ⇒ Obtain health authorities and ethics committee approvals for all countries by end of the year.

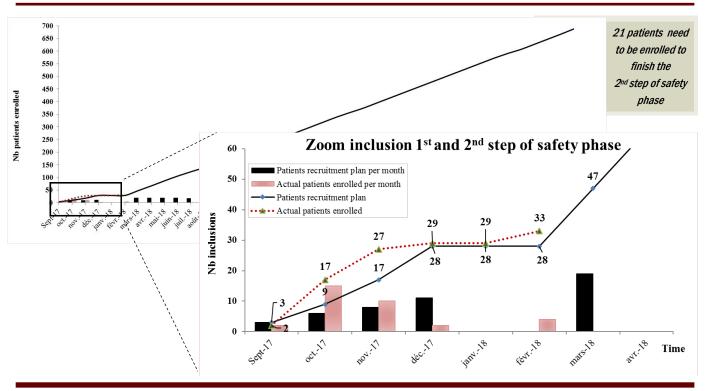


THE FIRST 33 PATIENTS ENROLLED: THANKS TO STUDY CLINICAL TEAM!

Hôp. Nord Franche Comté—Montbéliard (Dr Sun): 7 patients

Gustave Roussy—Villejuif (Dr Tao): 8 patients CHU Sud Amiens—Amiens (Pr Chauffert): 3 patients CH Bretagne Sud—Lorient (Dr Sire, Dr Bera): 8 patients Centre Guillaume Le Conquérant (Dr Martin): 4 patients Clinique Victor Hugo (Dr Lafond): 1 patient

Recruitment Update



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Important Reminder

A protocol amendment is actually in process. Some of the modifications relate to criteria for determination of the cohort:

- No sensorineural hearing loss (confirmed by audiogram): investigator clinical judgment and presence/absence of patient complaint will prevail for evaluation even if an audiogram still shall be done
- Addition of a new criterion: Age < 75 years. For patients aged 71-74-year-old, PS must be 0 and fit according to geriatric evaluation.
- In case of a patient presenting a non-eligibility criterion for cisplatin other than "sensorineural hearing loss", the audiogram becomes optional.

Study treatments:

RT-CT Phase	Cisplatin (Arm A)	Cetuximab (Arm B / C / D)	Avelumab (Arm B / C)
Infusion rates Duration	120 minutes minimum	1 st infusion : 5 mg/min Subsequent infusions : 10 mg/min	1 hour (50-80 min)
Dose calculations	1^{st} cycle (100 mg/m²): dose based on actual body weight with BSA \leq 2 m²	1 st infusion (400 mg/m²): dose based on actual body weight	1 st infusion (10 mg/kg): dose based on actual body weight
	Subsequent cycles (100 mg/m²): same dose as 1^{st} cycle as long as there's no change of $\geq 10\%$ of baseline patient weight	Subsequent infusions (250 mg/m²): dose based on actual body weight, reduction in case of weight loss ≥ 10% of baseline weight	Subsequent infusions (10 mg/kg): same dose as 1 st infusion as long as there's no change of \geq 10% of baseline patient weight
Infusion schedule	D1 , D22 , D43 21 (+/- 2) days between each infusion	Weekly: D-7 → D43 (D50 if RT still ongoing) 7 (+/-1) days between each infusion	Q2W: D-7 → D36 (D50 if RT still ongoing) 14 days between each infusion

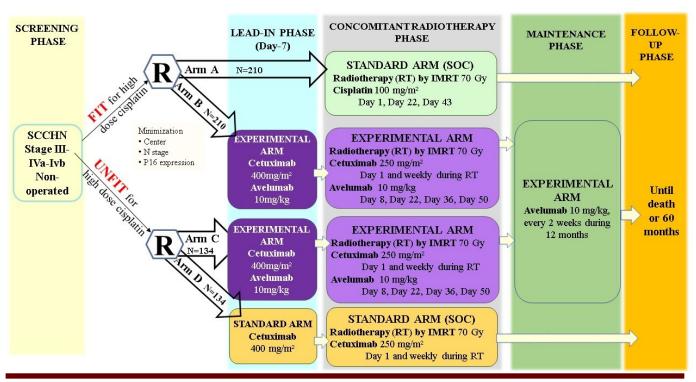
Avelumab - Maintenance Phase (Arms B & C)

If no infusion-related reactions are observed after the 4th avelumab infusion, **no further premedications** are required and the observation period can be shortened to **1-hour**

Study procedures:

- ✓ None of protocol specific procedure should be performed before informed consent signature
- ✓ Study treatment should start within maximum 10 days of randomization.

Study Design



YEAR 1, N°1

REACHContact Information



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