

# Clinical utility of ctDNA analysis in bladder cancer

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Superficial Bladder Cancer Lead

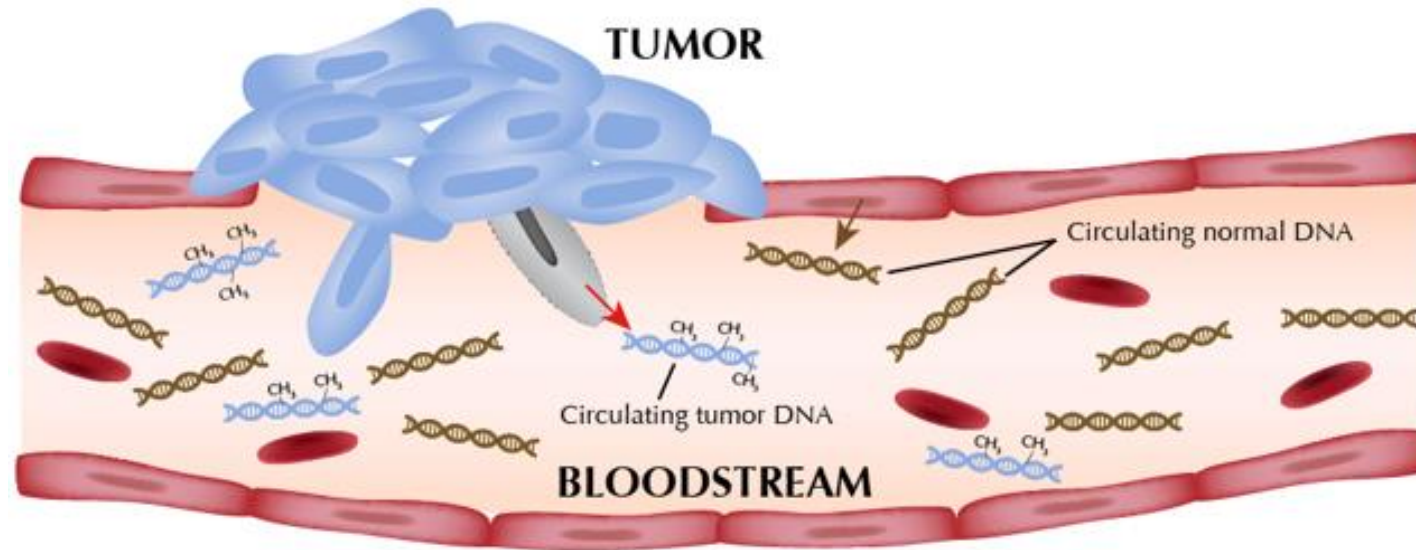
University College London Hospital and Barts Cancer Institute



# Disclosures

- **Travel, research funding:**  
Roche, Genentech, MSD, Pfizer, BMS
- **Honoraria:**  
Merck, Roche, Pfizer, Ellipses, Ipsen
- **Participating investigator** on studies with Roche/GNE, Pfizer, MSD, Exelixis, BMS, Astellas, AstraZeneca

# Circulating tumour DNA (ctDNA)



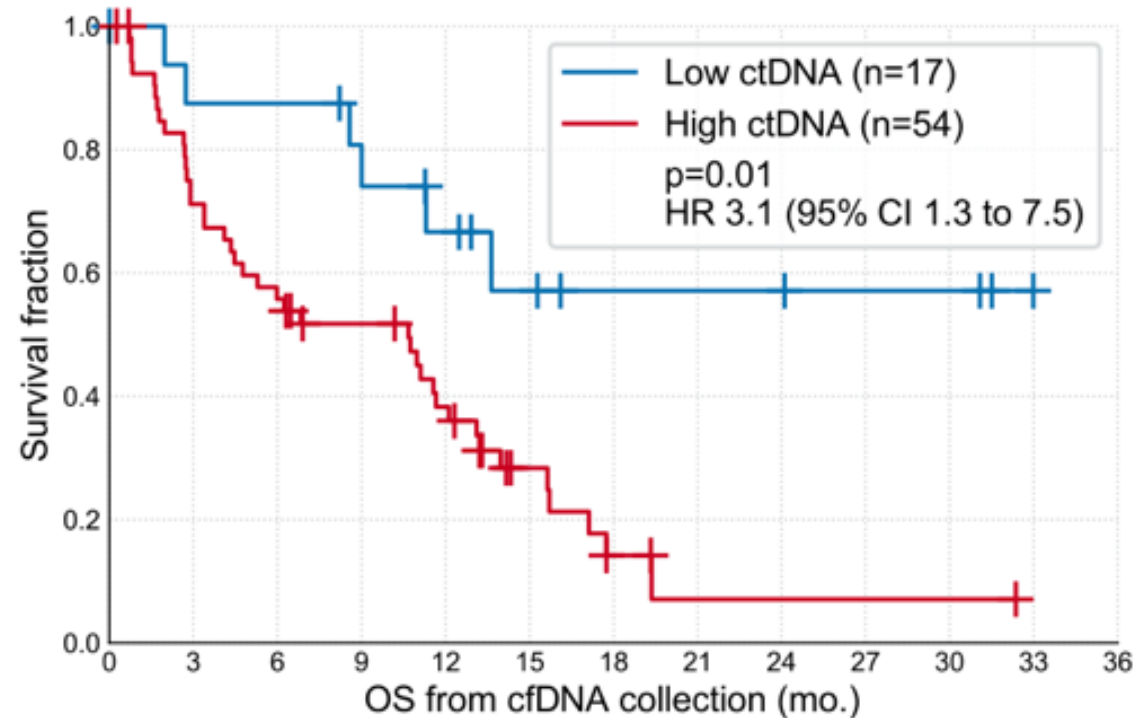
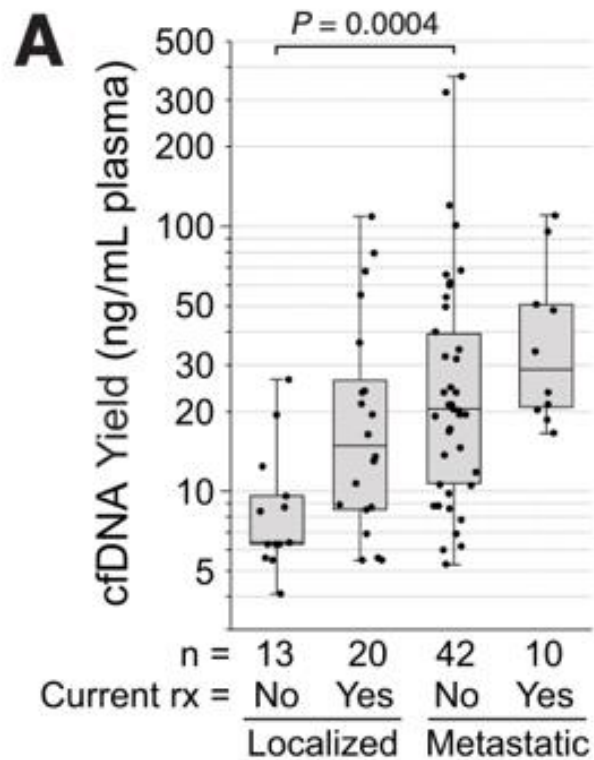
## Cell-free DNA

spontaneous release of DNA from healthy cells, blood cells, bacteria

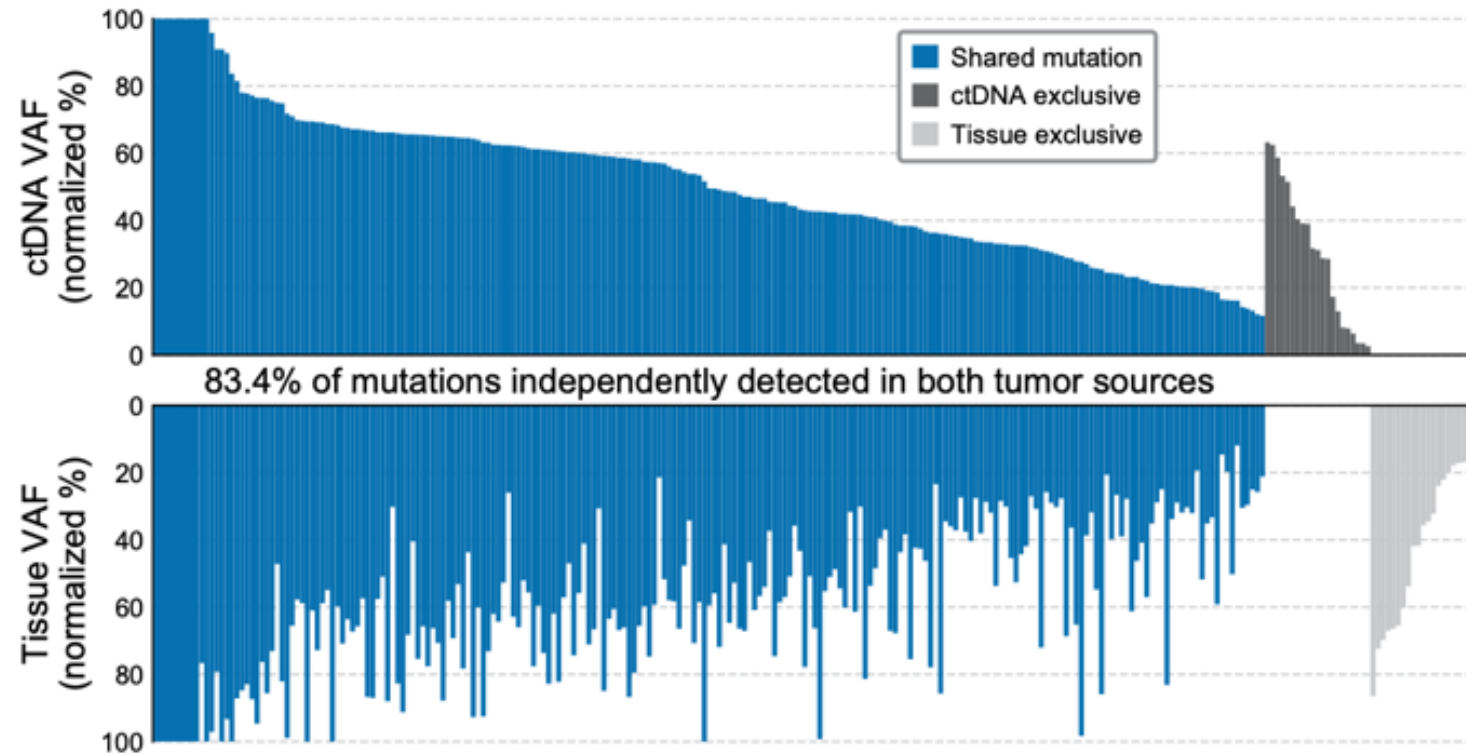
## Circulating tumour DNA

released through necrotic cells, apoptosis, active secretion  
cleared through elimination via liver or kidney  
short half-life: mins - hours

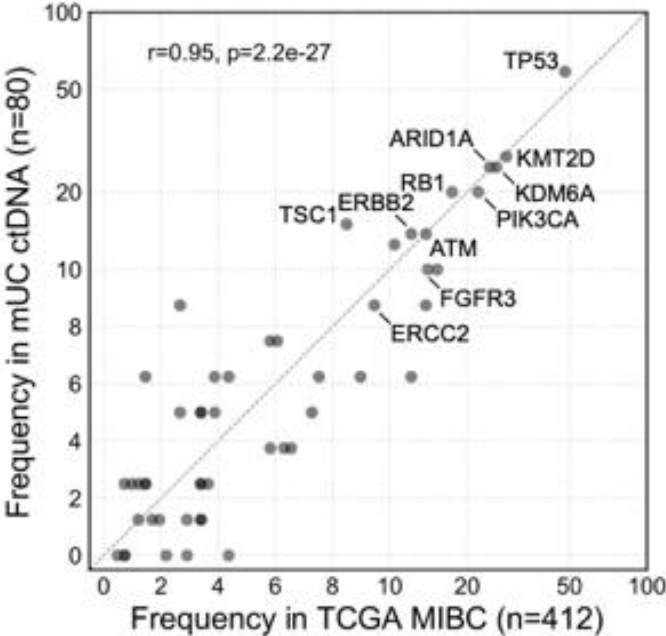
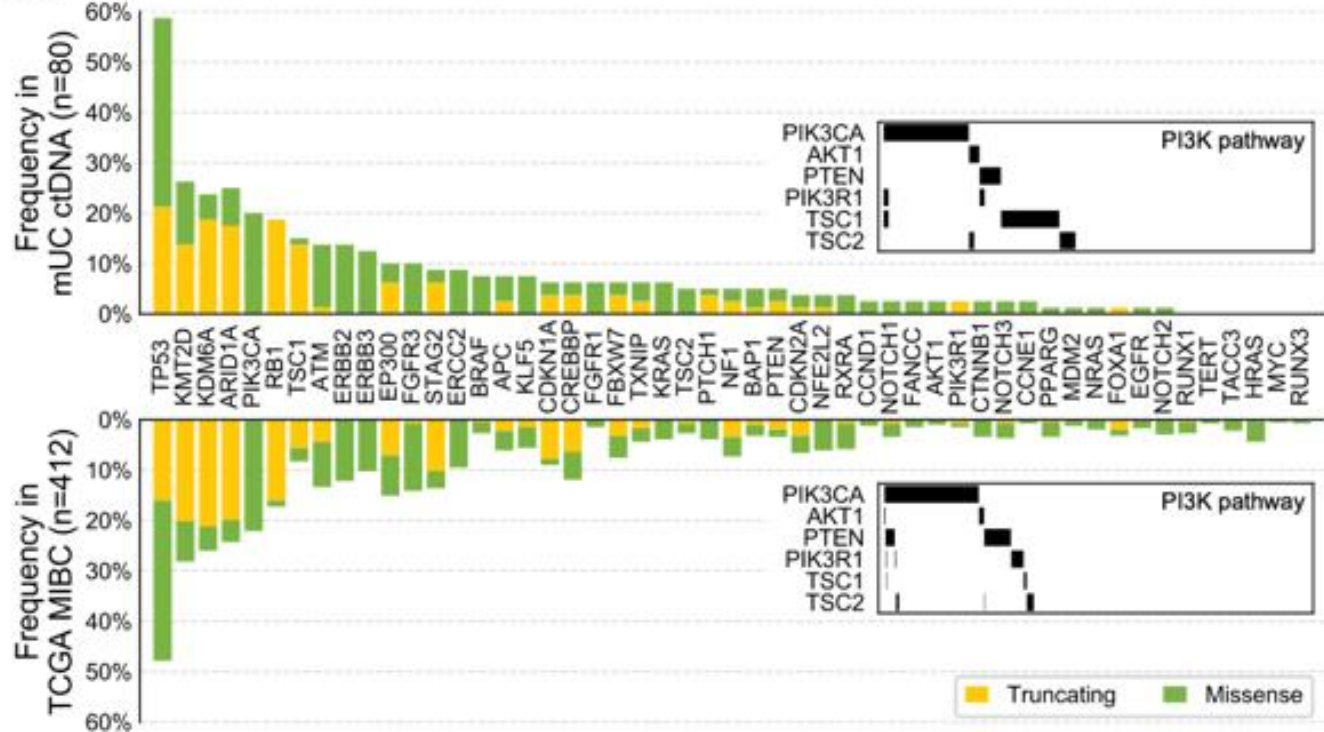
# ctDNA correlates with disease burden and prognosis



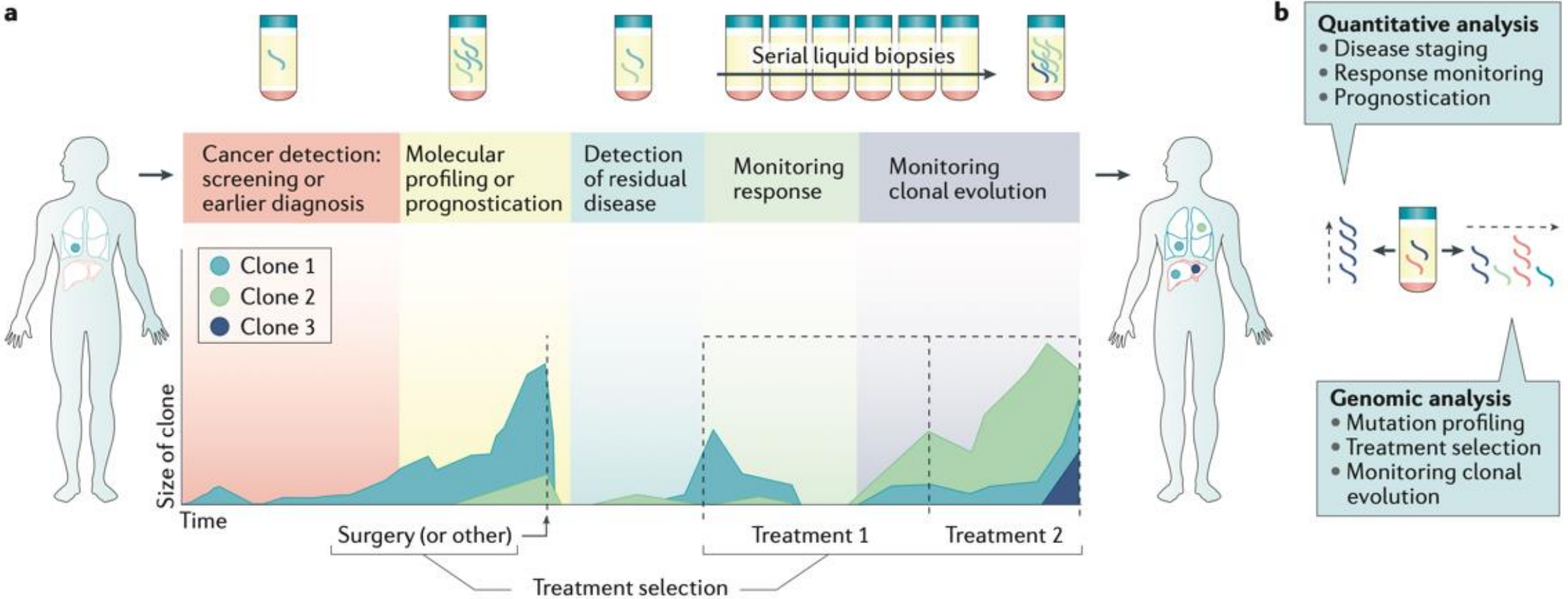
# High concordance between ctDNA and matched tissue



# Mutation type and frequency of mUC ctDNA similar to TCGA MIBC cohort



# Current ctDNA applications





**Detection of minimal  
residual disease (MRD)**



# Phase 3 IMvigor010 adjuvant study in MIBC

## Key eligibility

- High-risk MIUC (bladder or upper tract)
- Radical surgery with lymph node dissection within  $\leq 14$  weeks
- Tissue sample for PD-L1 testing

R  
1:1

Atezolizumab  
1200 mg q3w  
(16 cycles or 1 year)

No crossover allowed

Observation q3w

Disease recurrence/  
survival follow-up

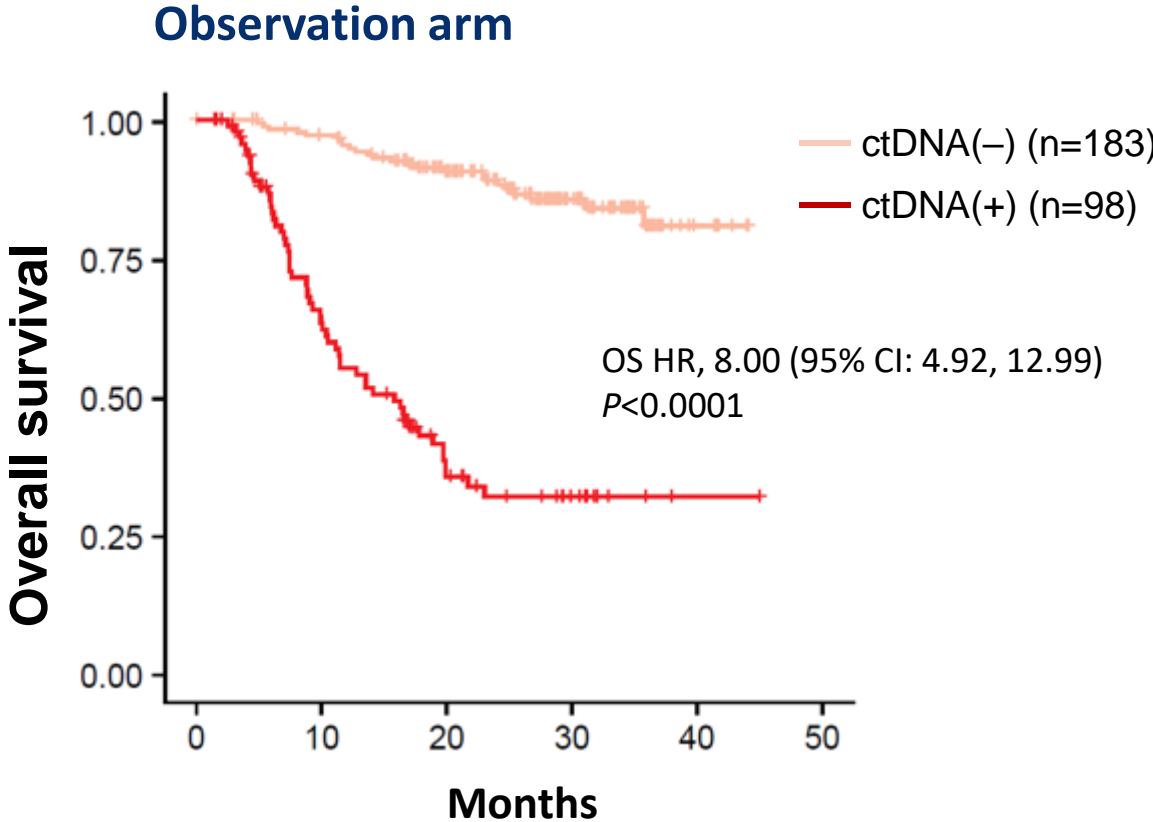
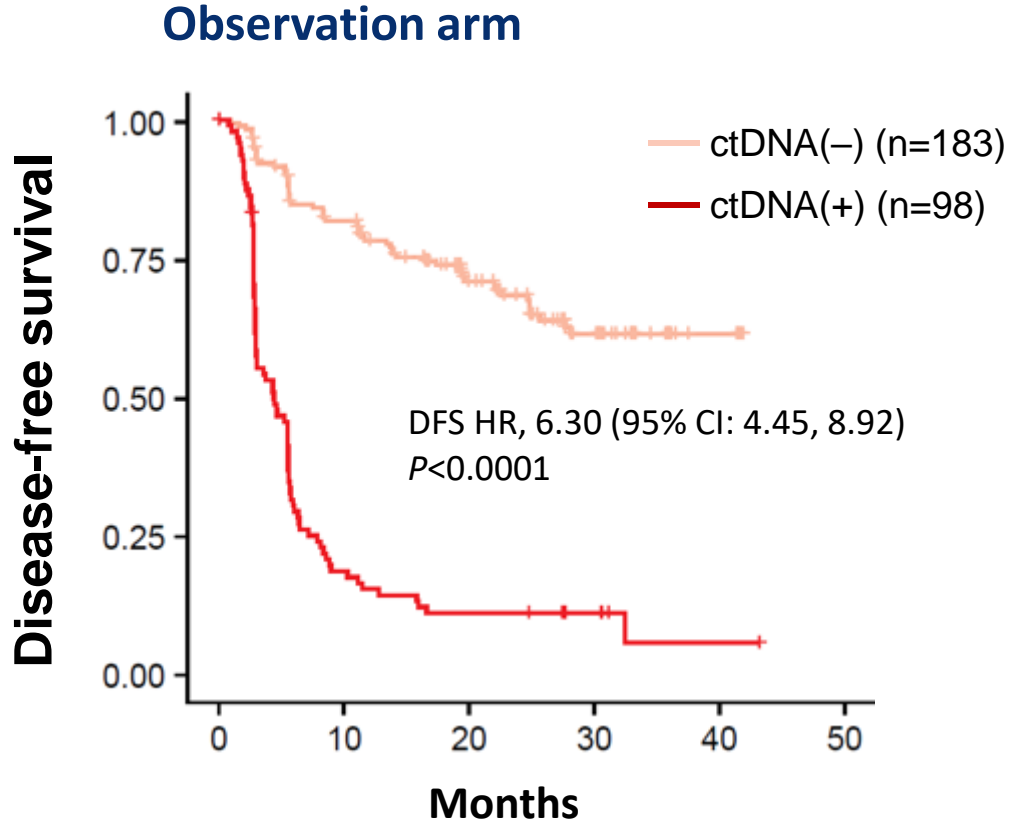
## Endpoints

- Primary: DFS (ITT population)
- Key secondary: OS (ITT population)
- Other: Safety
- **Exploratory: predictive, prognostic and pharmacodynamic biomarkers in tumour tissue and blood and their association with disease recurrence**

- IMvigor010 did not meet its primary endpoint (DFS in the ITT population)<sup>1</sup>
  - A pre-planned interim OS analysis was performed but could not be formally tested
  - OS follow-up is immature and ongoing in the ITT population
- The PD-L1 and TMB biomarkers did not identify patients benefitting from atezolizumab vs observation in the ITT population
- A pre-specified ctDNA biomarker analysis was performed

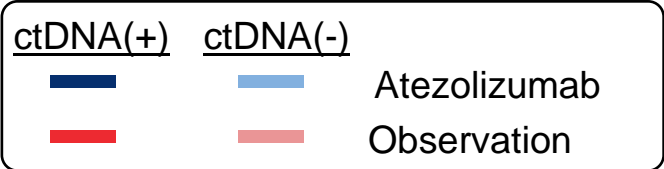
ClinicalTrials.gov ID, NCT02450331.  
IC, tumour-infiltrating immune cells;  
q3w, every 3 weeks. TMB, tumour  
mutational burden. 1. Hussain M, et al.

# ctDNA(+) patients have poor prognosis

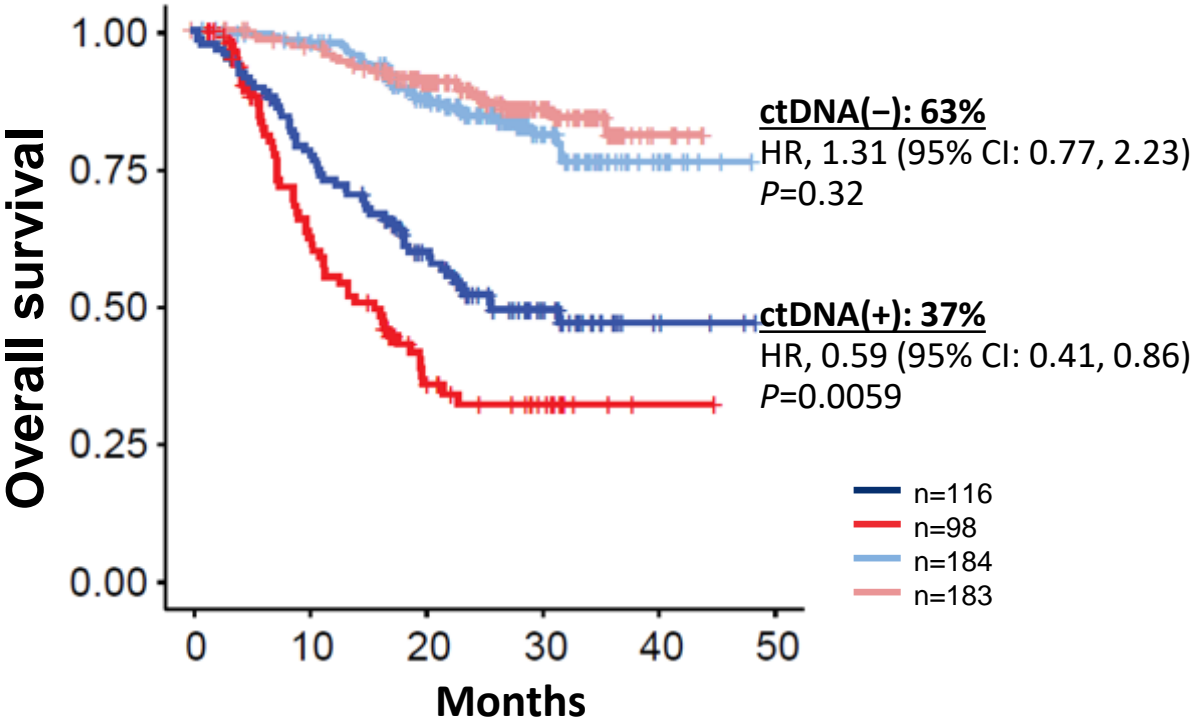
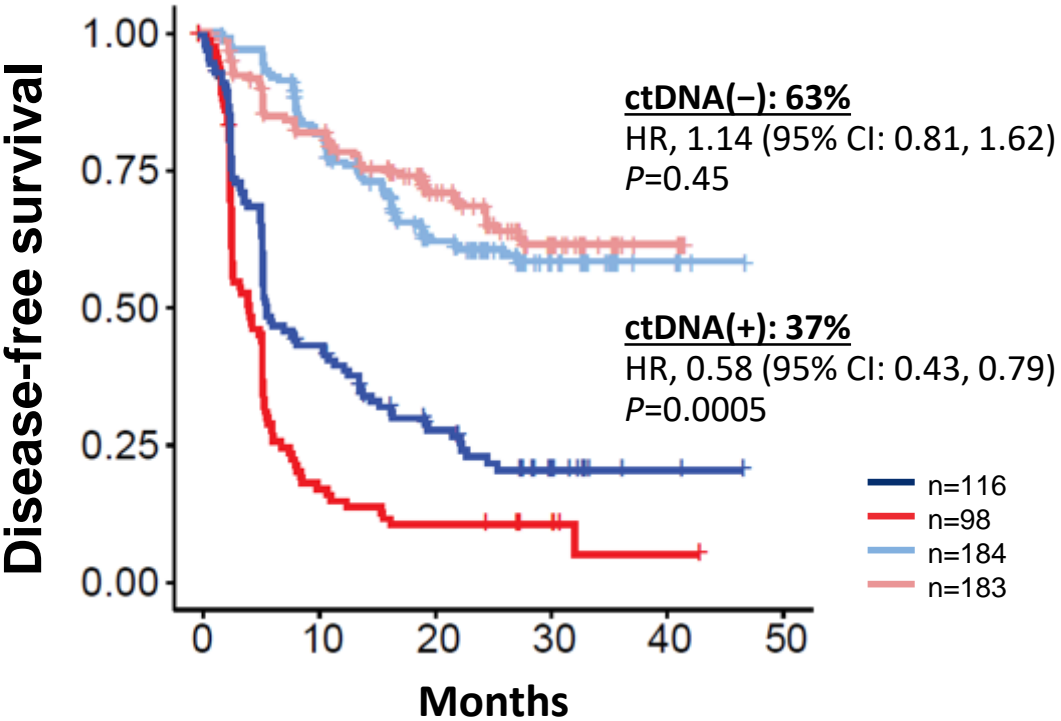


- IMvigor010 confirmed the prognostic value of ctDNA status

# ctDNA(+) patients in the BEP had improved DFS and OS with atezolizumab vs observation

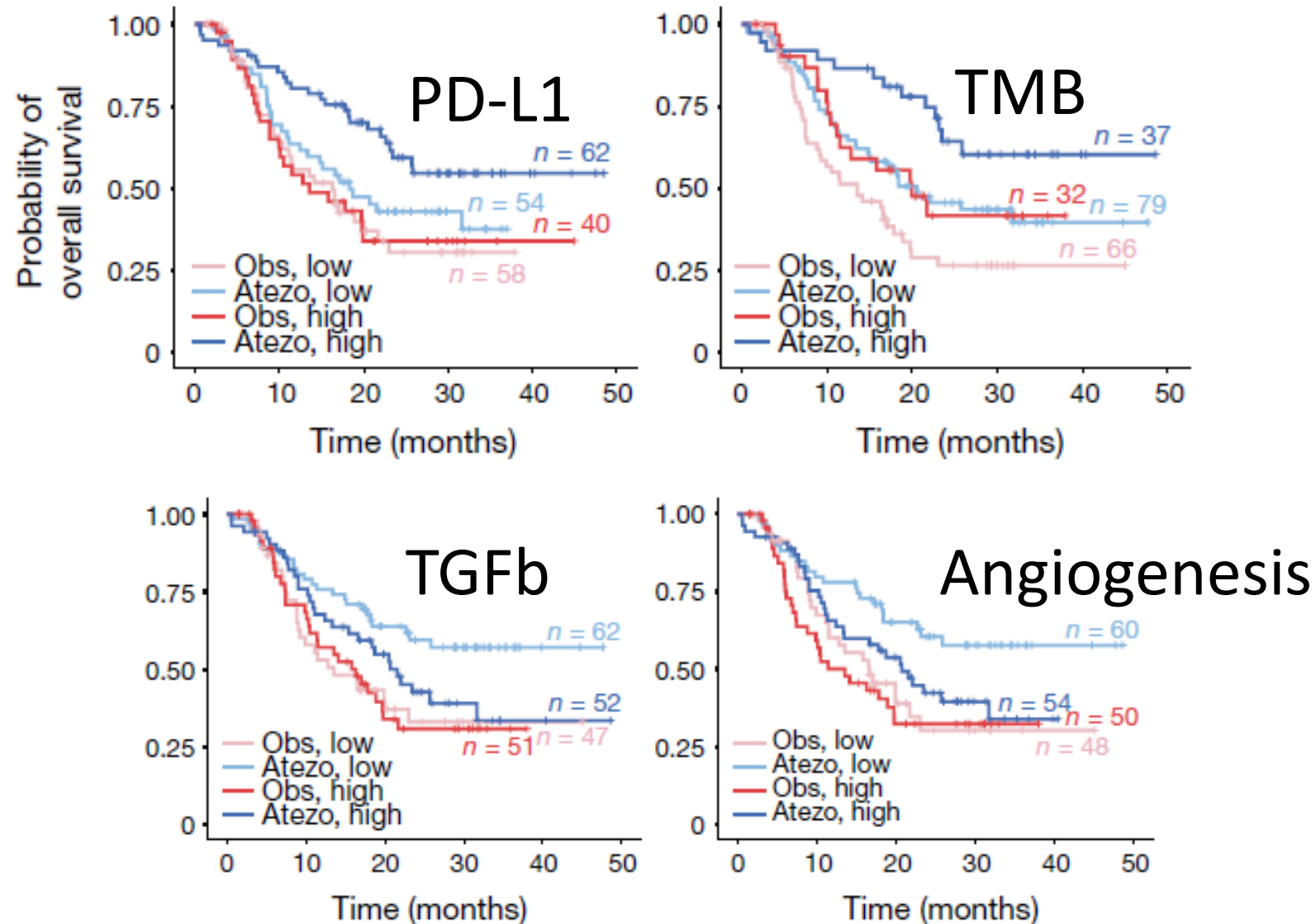


ctDNA(+) patients		
	Atezolizumab	Observation
Median DFS (95% CI), mo	5.9 (5.6, 11.2)	4.4 (2.9, 5.6)
Median OS (95% CI), mo	25.8 (20.5, NR)	15.8 (10.5, 19.7)



NR, not reached.

# Outcome in ctDNA+ve patients is related to tissue based immune biomarkers



# FDA Grants Two New Breakthrough Device Designations for Natera's Signatera™ MRD Test



Designations help accelerate the regulatory review and approval of Signatera across a variety of solid tumor indications

NEWS PROVIDED BY  
[Natera, Inc. →](#)  
Mar 24, 2021, 09:03 ET

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JULY 18, 2022

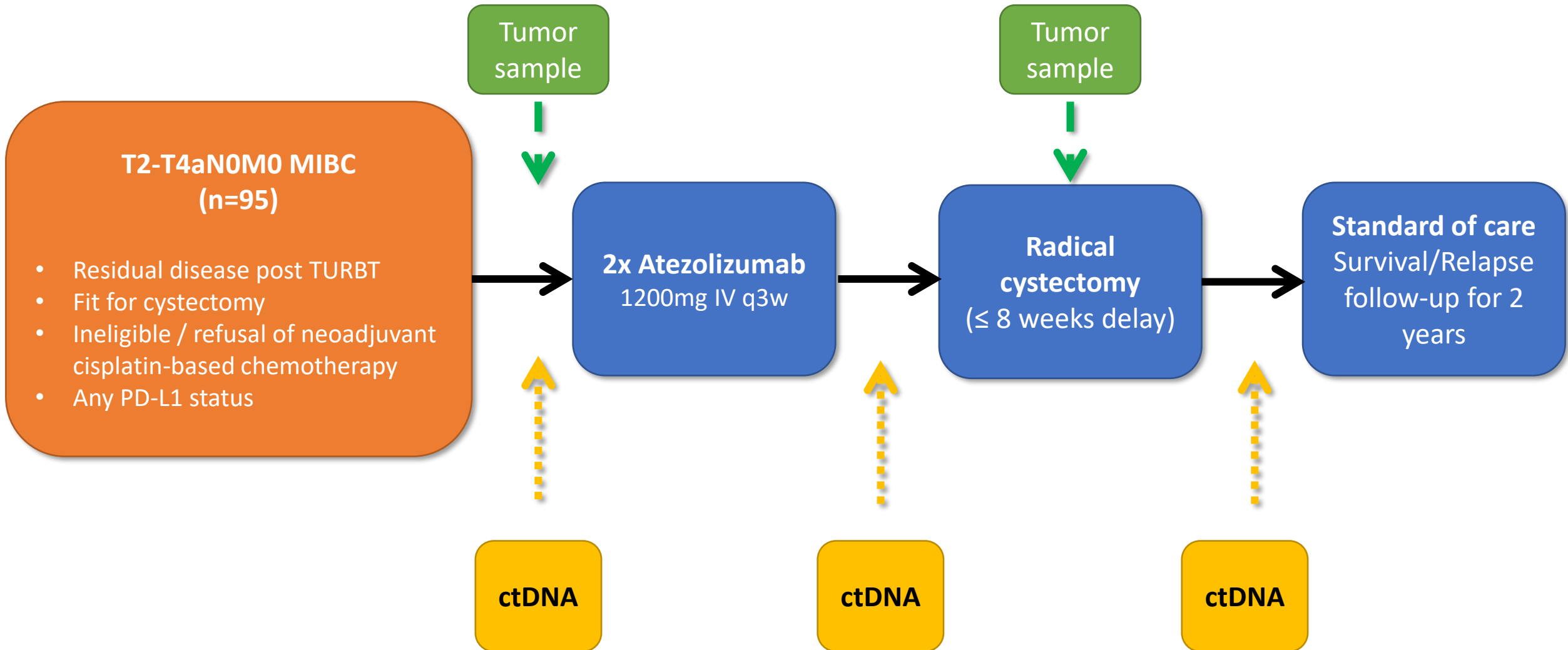
## Medicare Extends Coverage of Natera's Signatera™ MRD Test to Muscle Invasive Bladder Cancer

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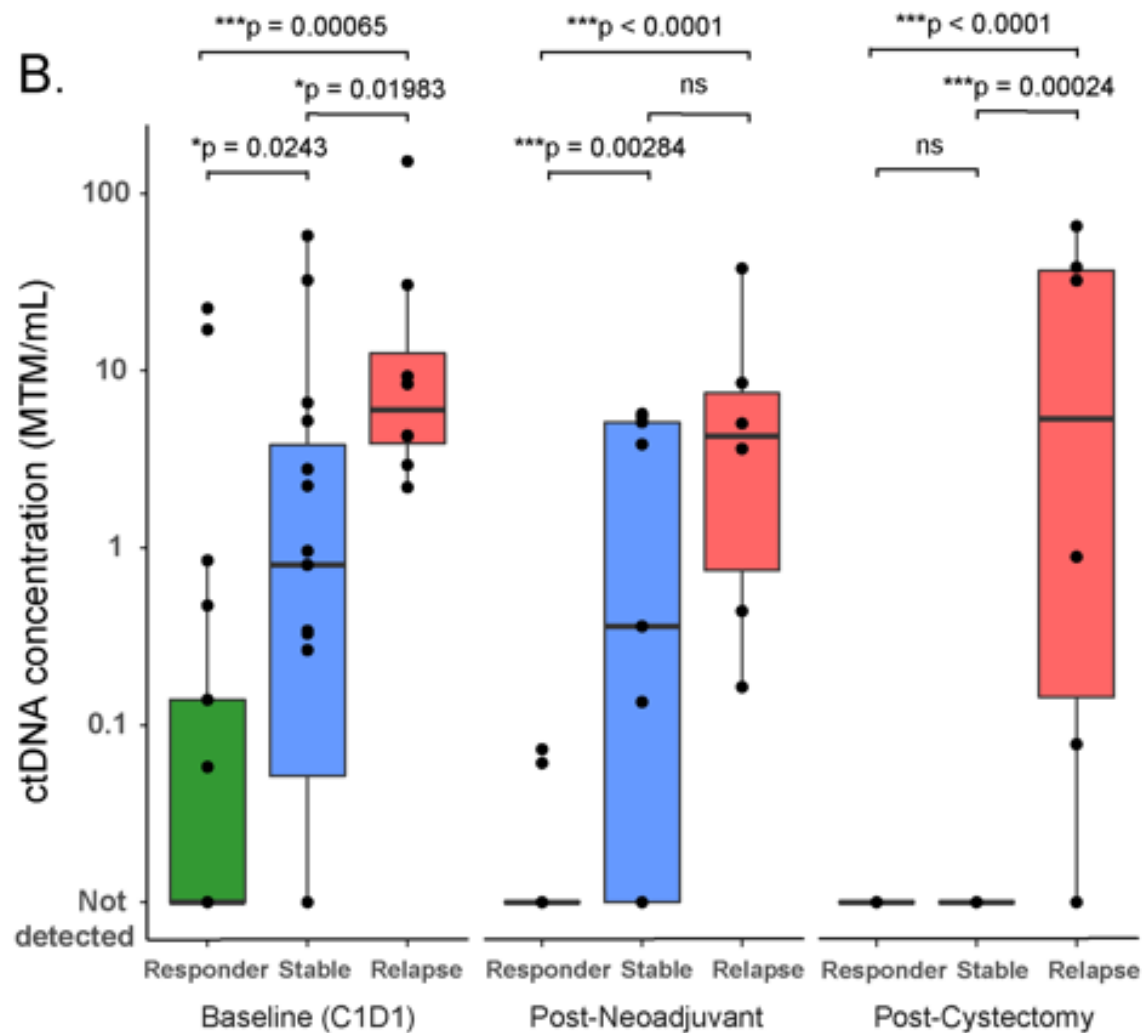
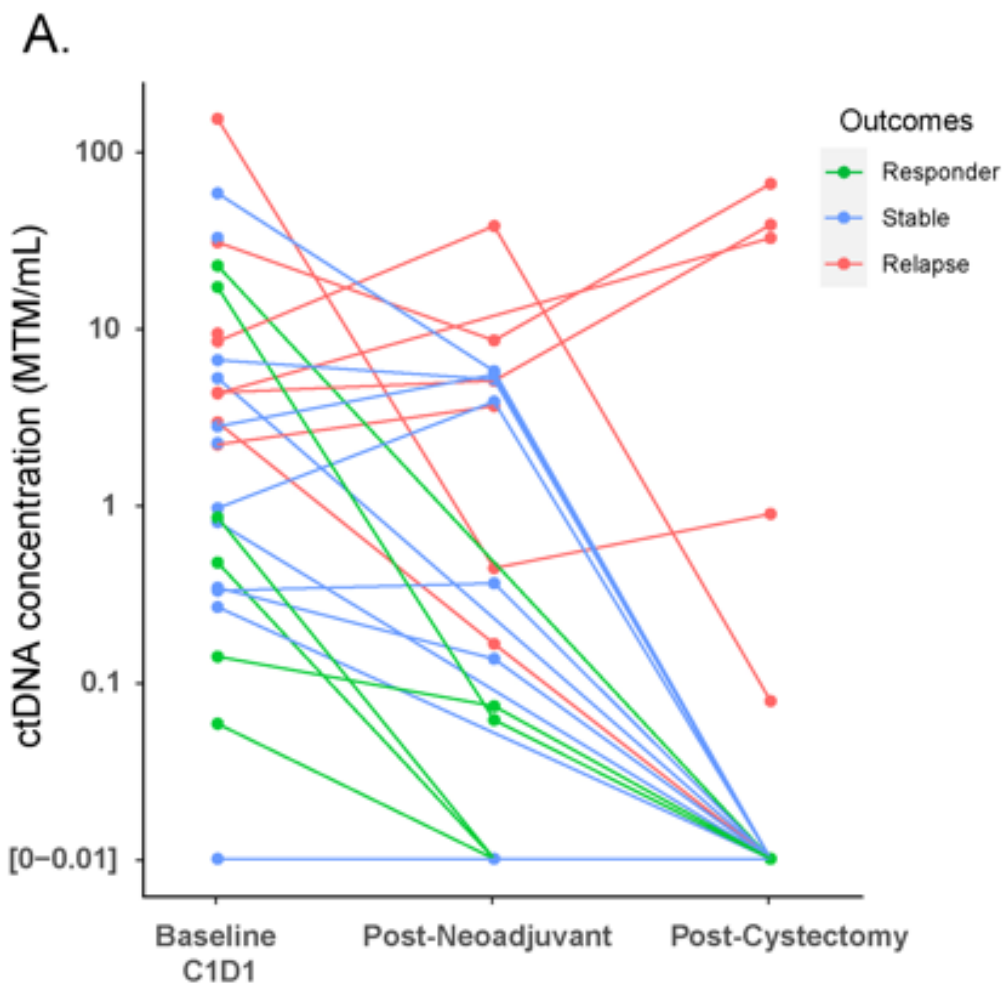
The image shows two individuals in a clinical or laboratory environment, both wearing full personal protective equipment (PPE). They are wearing blue surgical gowns, white balaclavas, clear safety goggles, and white surgical masks. The person on the left is pointing at a large monitor displaying a medical scan, likely an X-ray or CT scan. The person on the right is looking at the same monitor. The background is slightly blurred, showing what appears to be a hospital or lab setting. The overall lighting is somewhat dim, with a blueish tint.

# Measurement of treatment response

# ABACUS

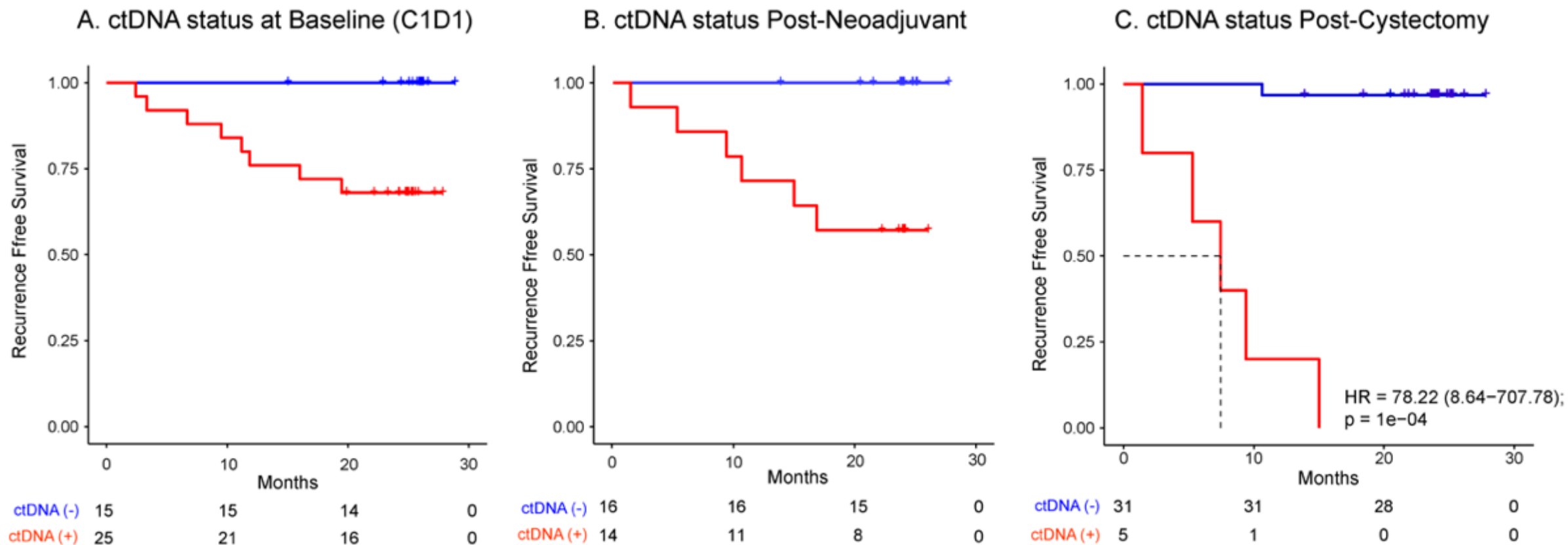


# Correlation between ctDNA and response

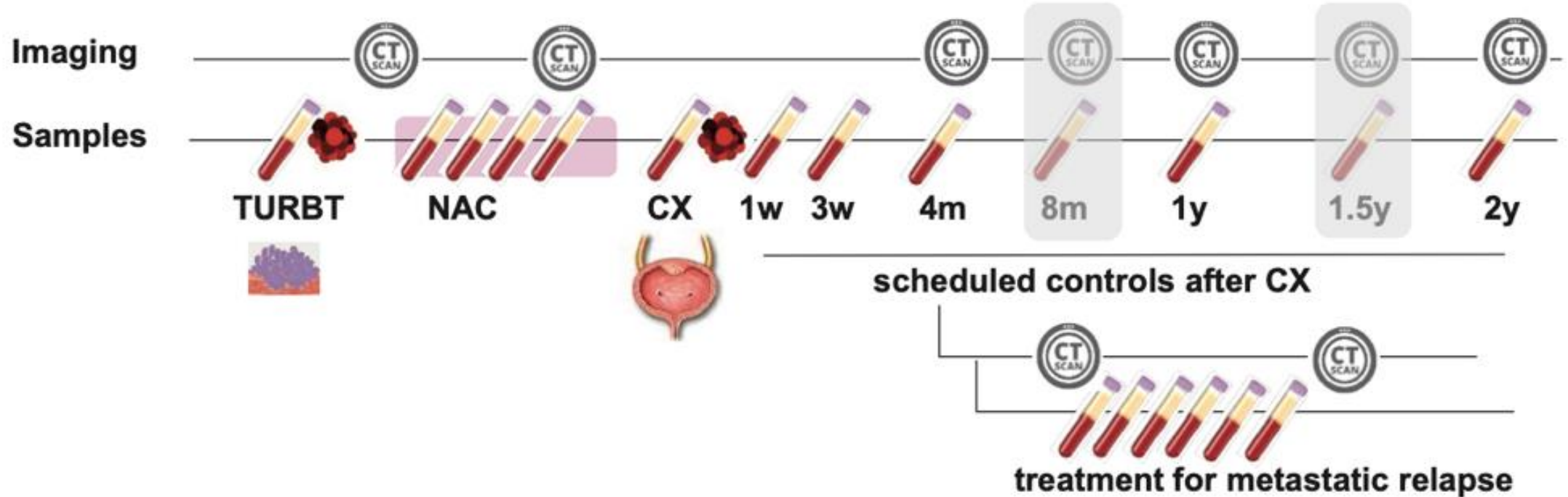




# Correlation between ctDNA and survival

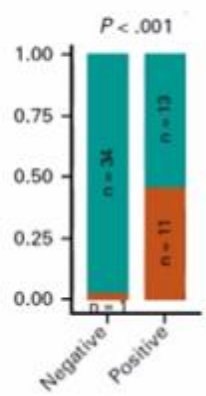
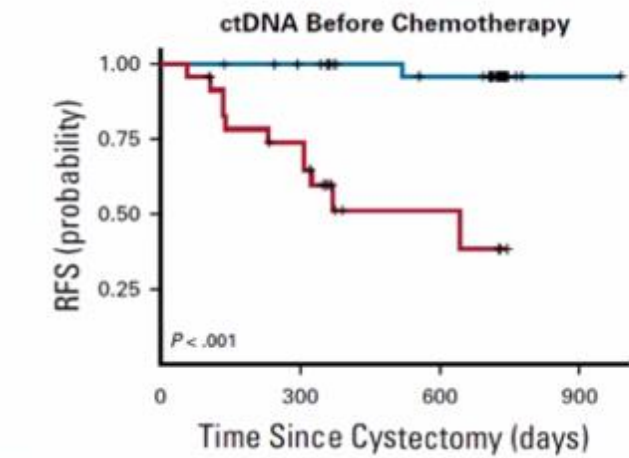


# Longitudinal ctDNA analysis in MIBC

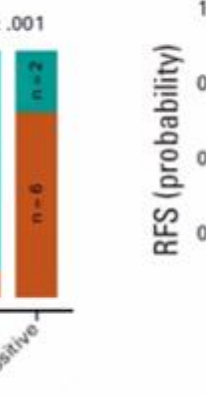
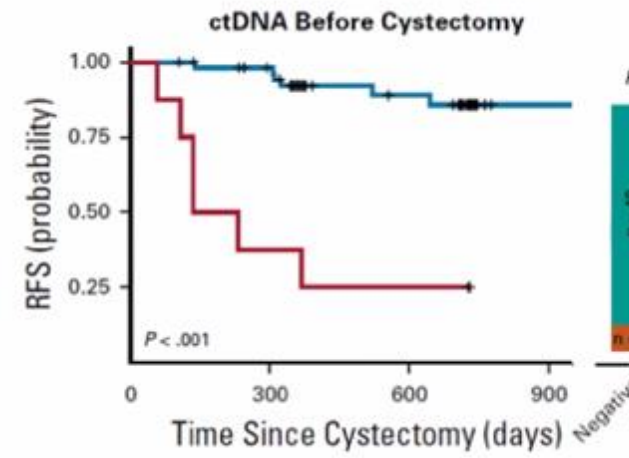


68 patients

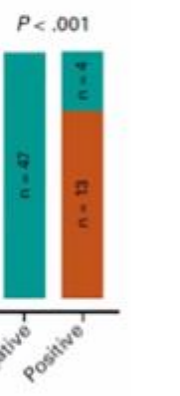
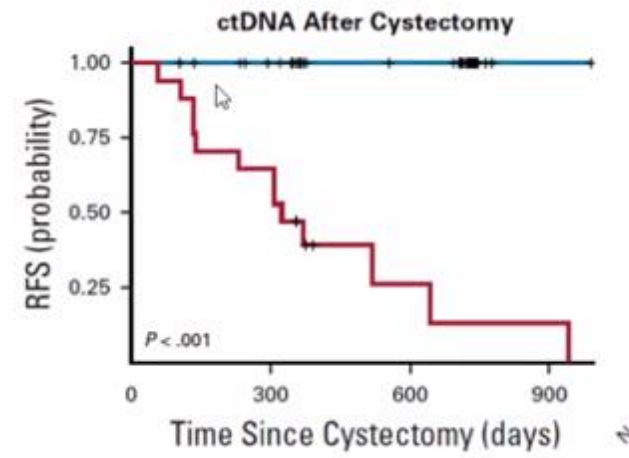
# Correlation between ctDNA and NAC in MIBC



No. at risk	0	300	600	900
Negative	35	32	23	1
Positive	24	16	4	0



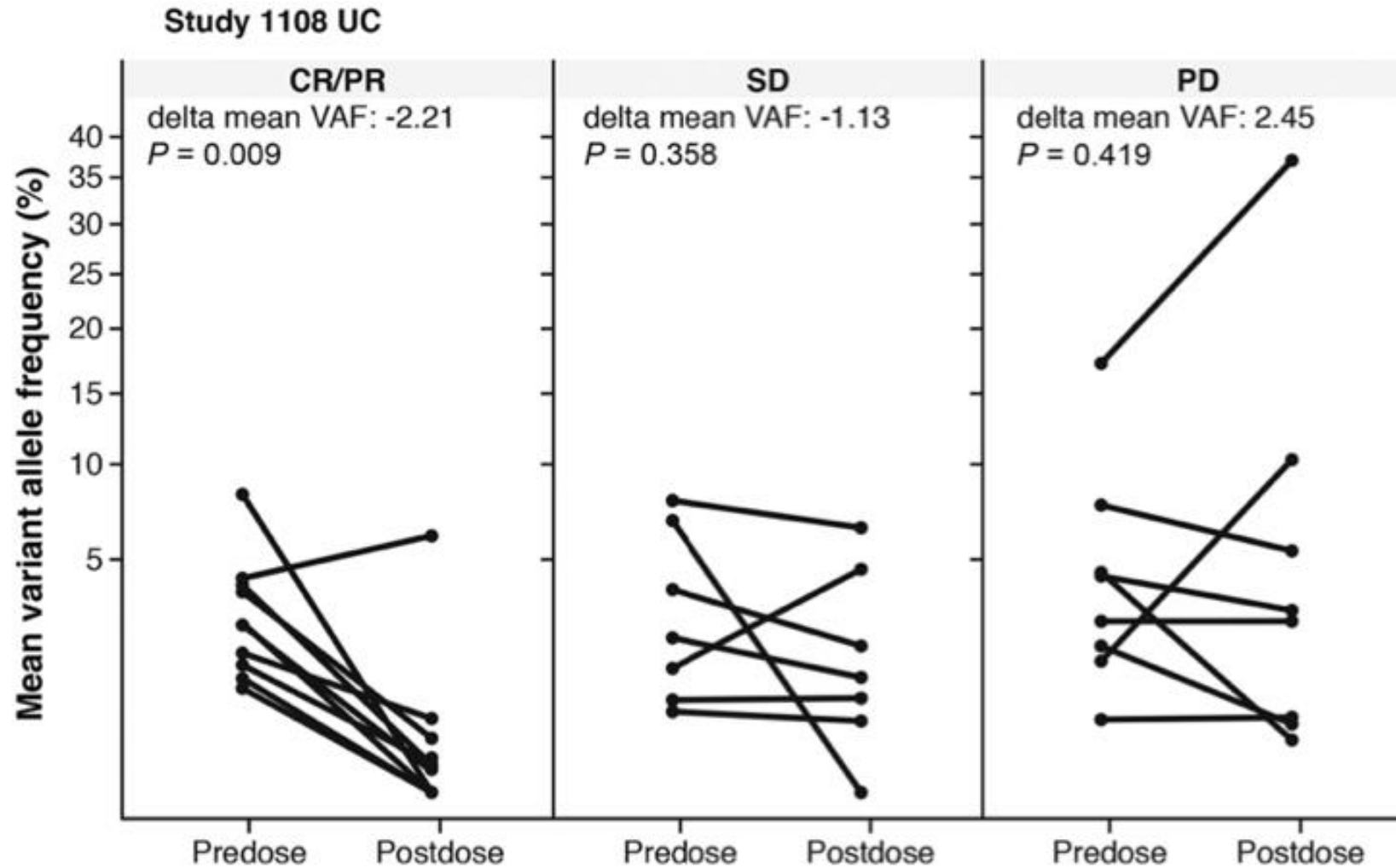
No. at risk	0	300	600	900
Negative	55	49	28	1
Positive	8	3	2	0



No. at risk	0	300	600	900
Negative	47	42	29	1
Positive	17	11	2	1

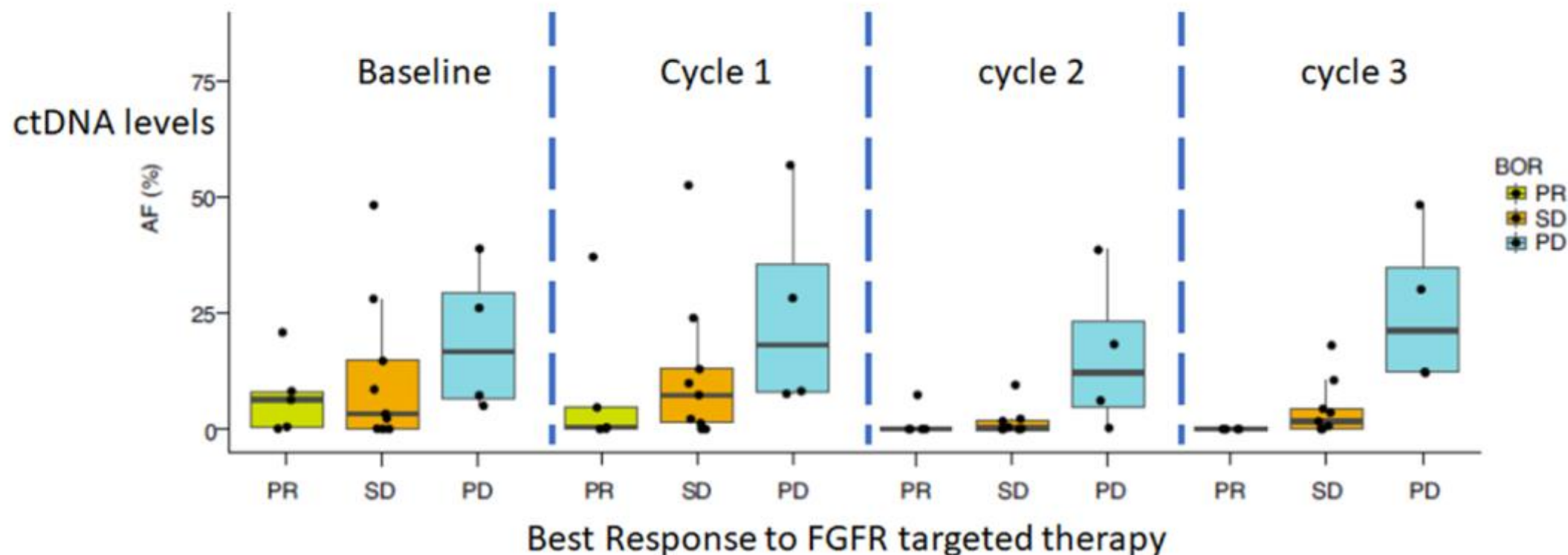
■ No recurrence ■ Recurrence

# Correlation between ctDNA and IO in mUC

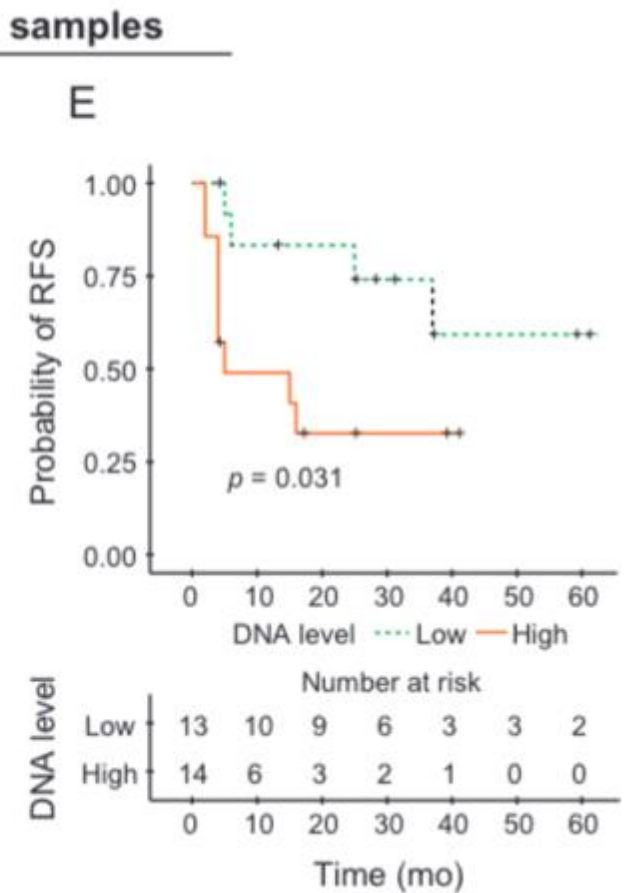
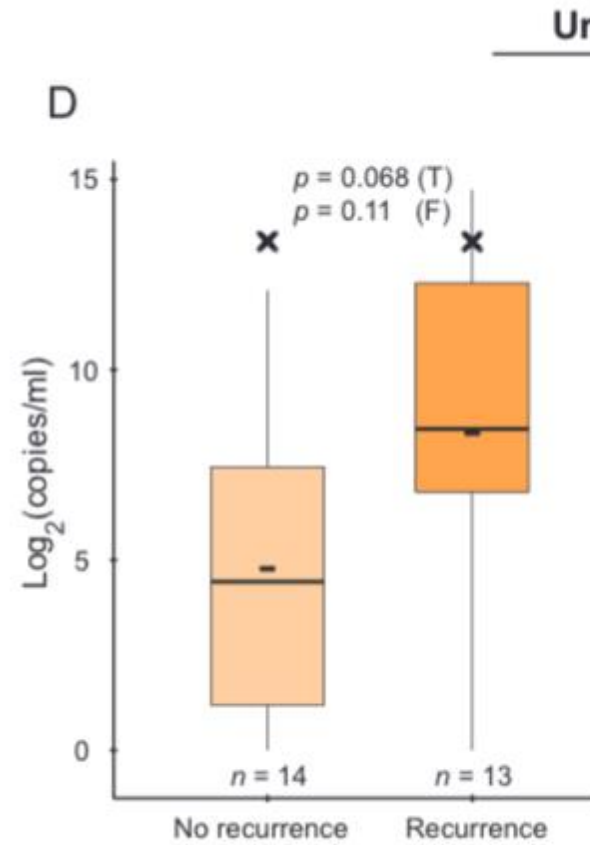
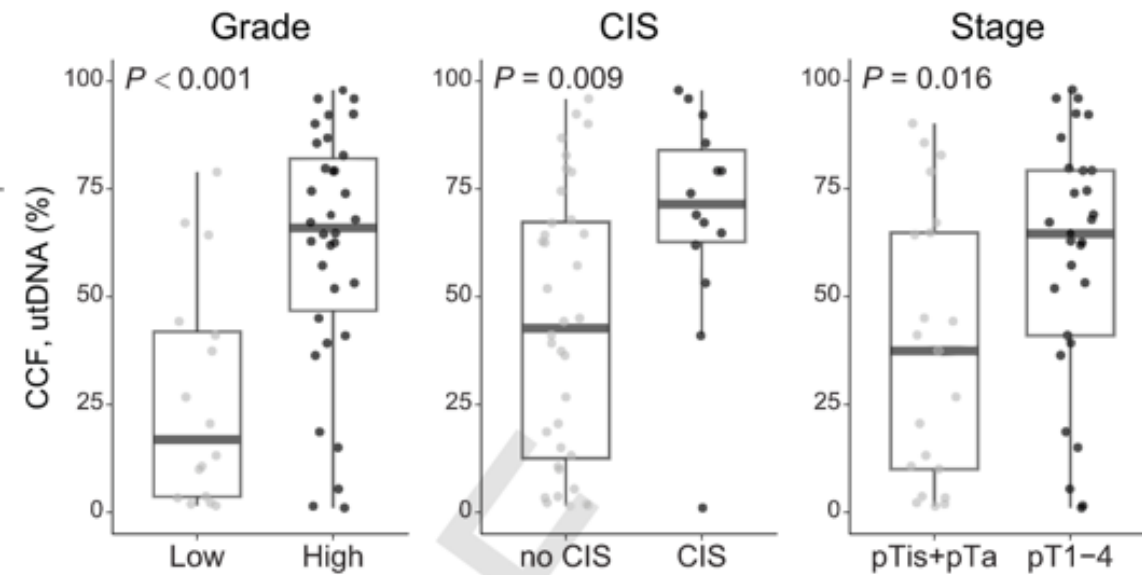


## An adaptive, biomarker-directed platform study of durvalumab in combination with targeted therapies in advanced urothelial cancer

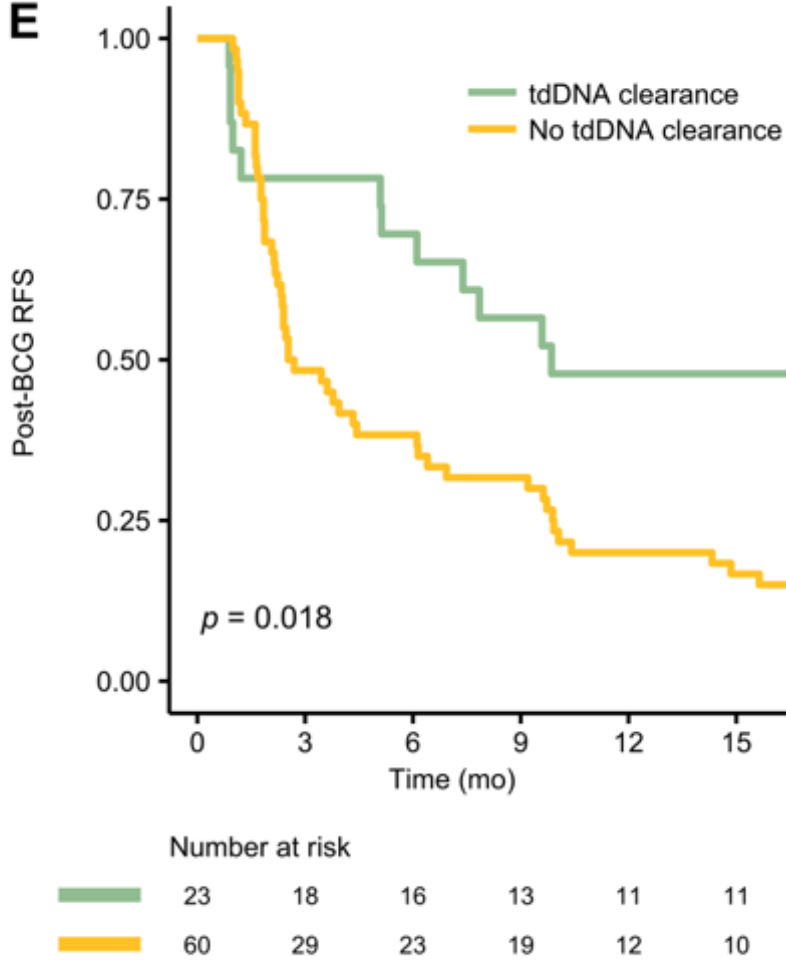
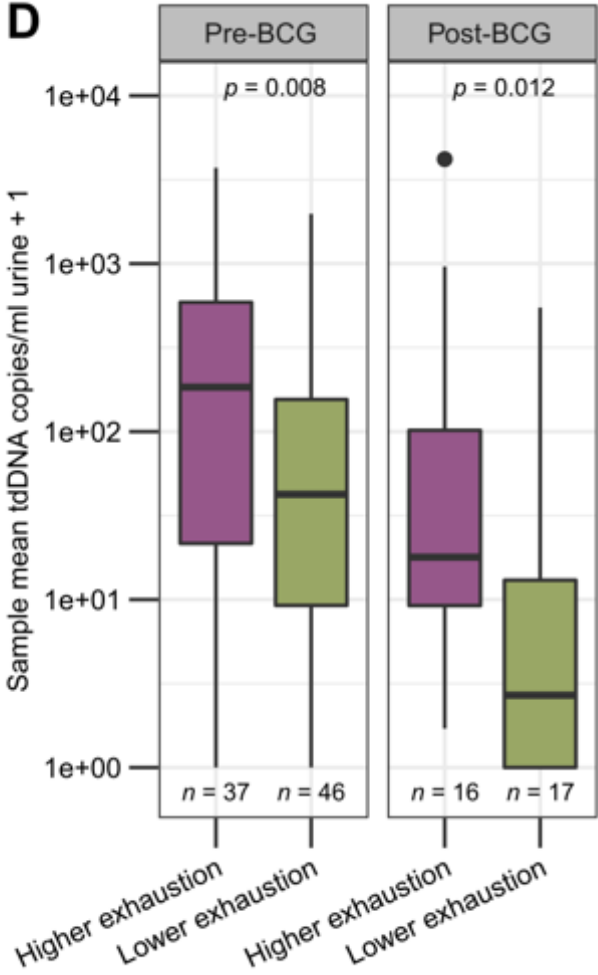
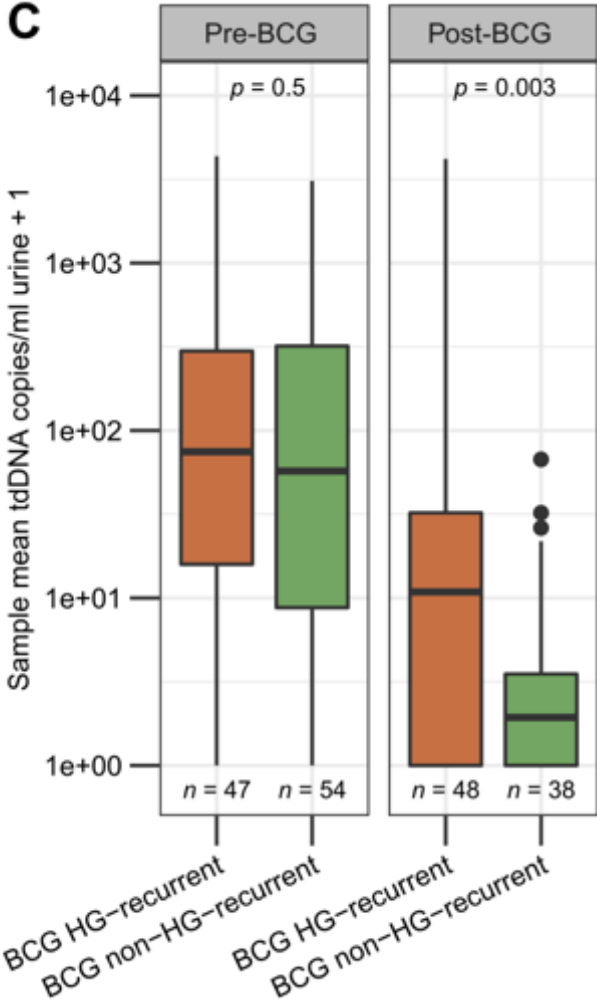
Response to FGFR targeted therapy correlating with changes to tracked FGFR mutations



# Urinary tumour DNA (utDNA)



# Post-BCG utDNA persistence identifies patients at high risk of recurrence in NMIBC

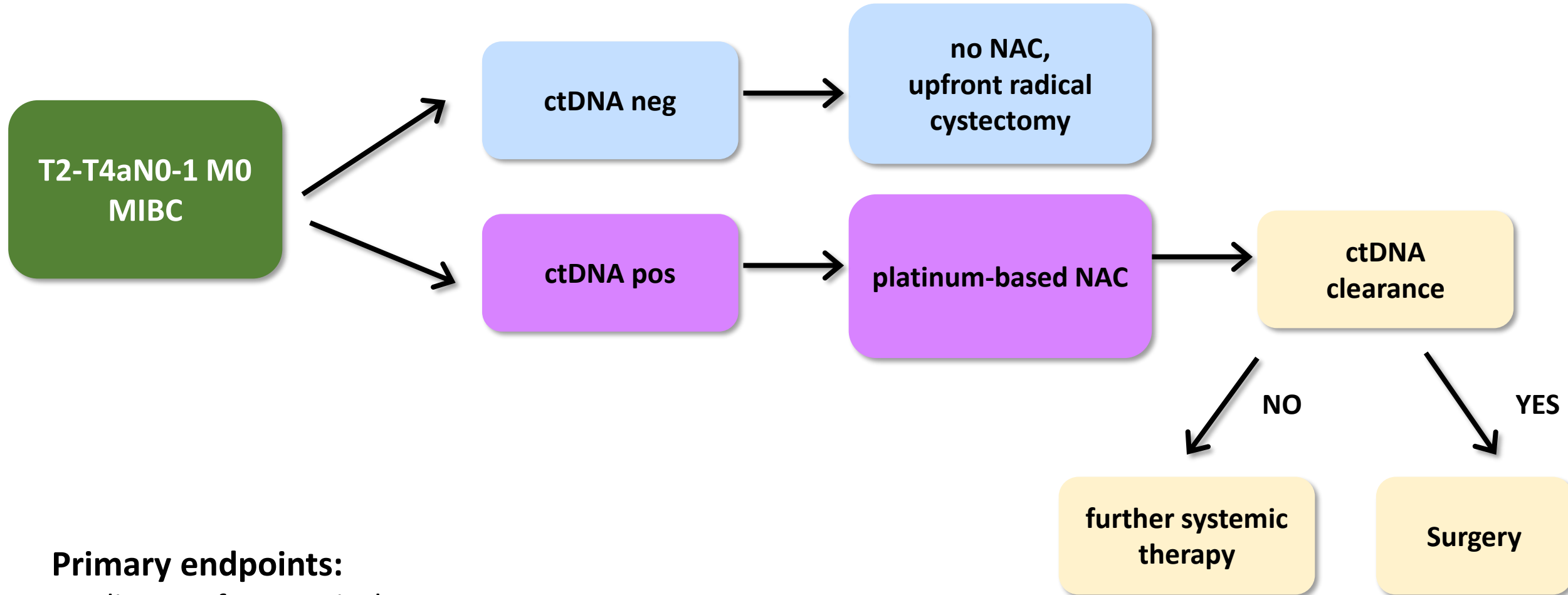


A laboratory setting with a pipette dispensing liquid into test tubes. The scene is bathed in a cool blue light. In the foreground, a glass pipette is tilted, with a single drop of clear liquid hanging from its tip. Below it, a row of five clear glass test tubes is visible, some containing liquid. In the background, a white pipette tip is positioned over another test tube. To the right, a white pipette body is visible, with a scale showing the number '10'. The overall atmosphere is clean and scientific.

**Use in clinical trials**



# ctDNA guided treatment in the **NEOADJUVANT** setting

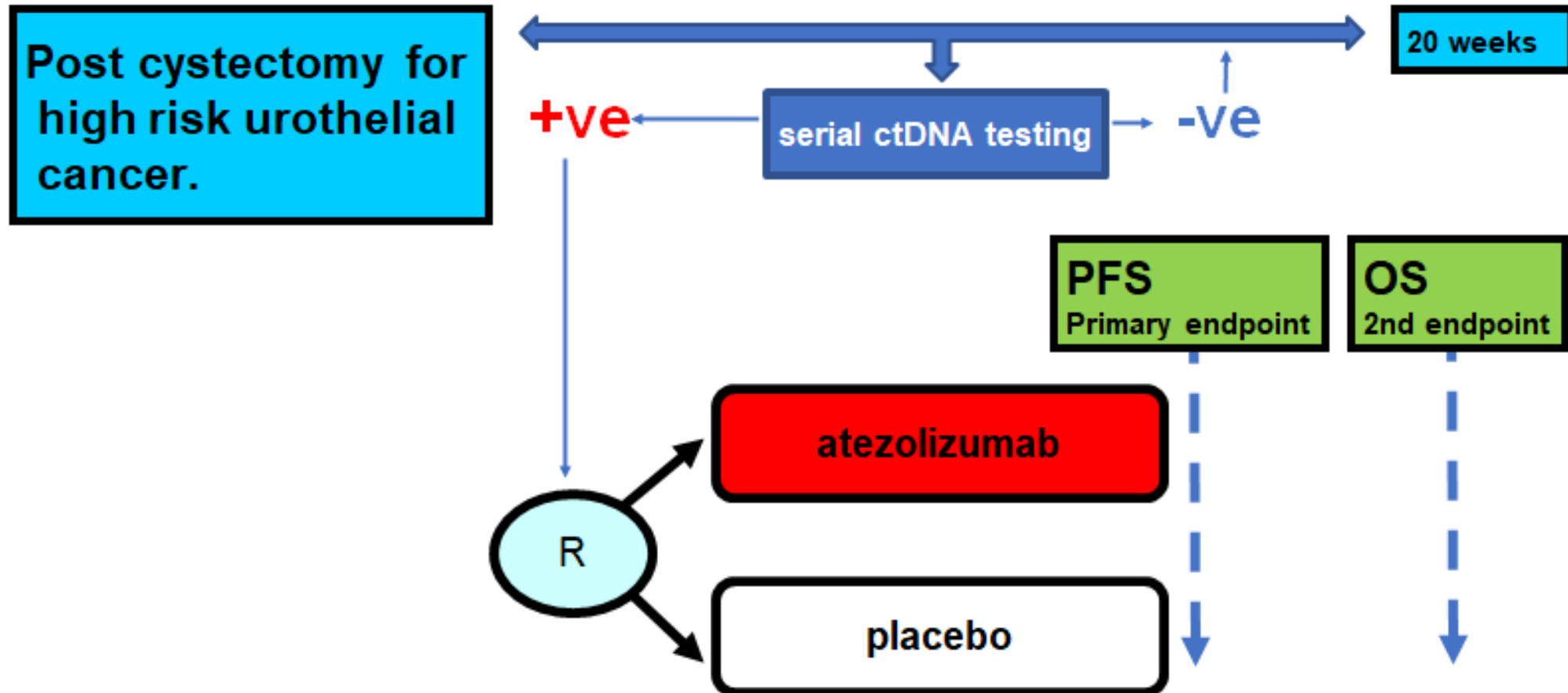


## Primary endpoints:

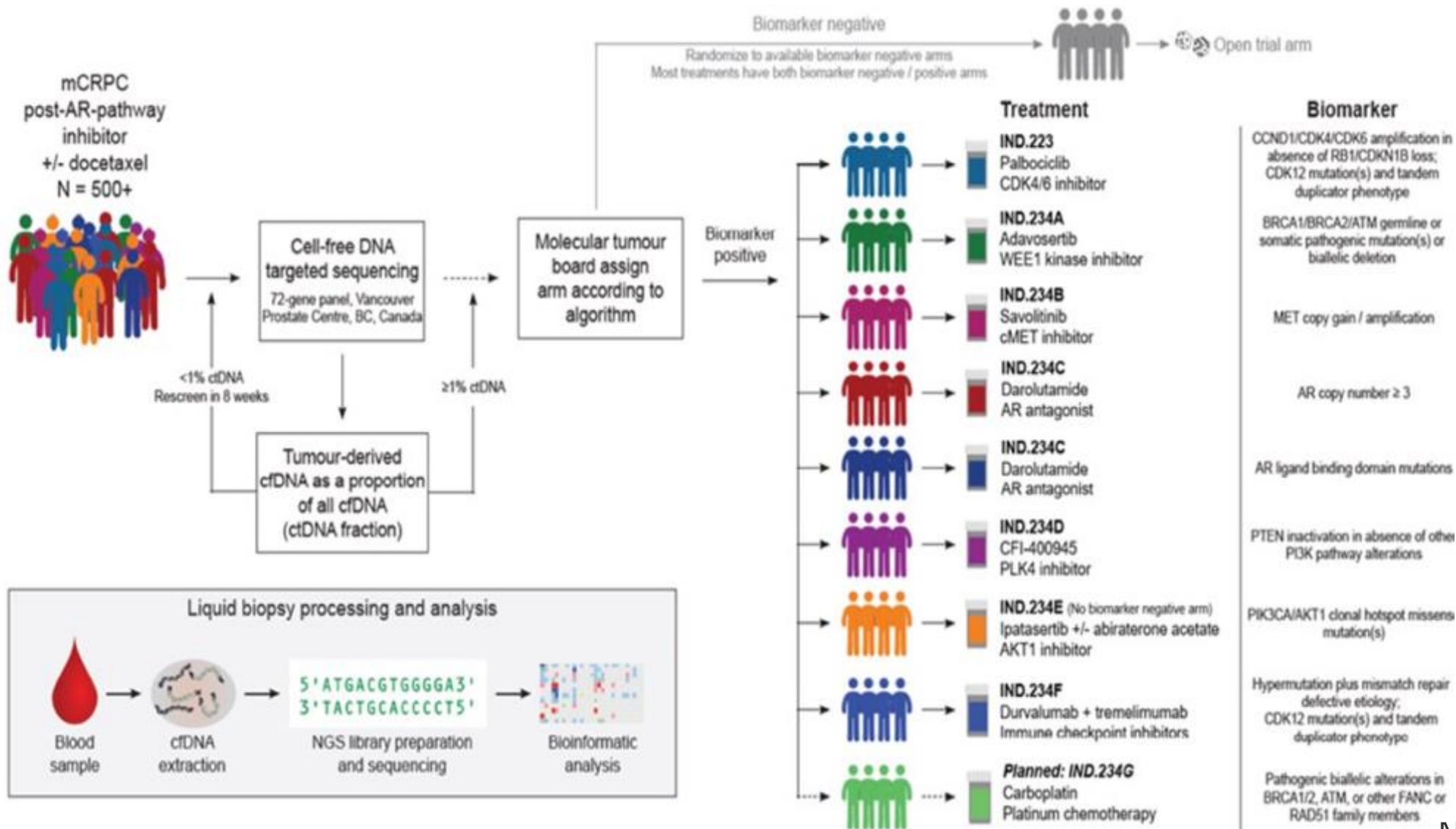
- disease-free survival
- cystectomy-free survival

# ctDNA guided treatment in the **ADJUVANT** setting

Adjuvant Atezolizumab vs Placebo in High-Risk Muscle-Invasive Bladder Cancer Who Are ctDNA Positive Following Cystectomy (IMvigor011)



# ctDNA guided treatment in the METASTATIC setting



# Summary

- Novel technologies (Signatera, FoundationOne Tracker) enabling wider implementation of ctDNA analysis
- Useful during the entire disease course to inform clinical practice (MRD, response monitoring)



**Need for prospective, ctDNA guided, adaptive clinical trials**