

# GI Phase I Clinical Trial Portfolio

Study Number	Disease Status	Slot Availability	Study Title	Basic Eligibility
<b>HCC Studies</b>				
Eisai H3B-6527-G000-101	Advanced, unresectable, or recurrent HCC/ICC TUMORS MUST EXPRESS FGF19 [FOUNDATION, ETC.]	Open and Enrolling	An Open-Label Multicenter Phase 1 Study to Evaluate the Safety, Pharmacokinetics and Pharmacodynamics of H3B-6527 in Subjects With Advanced HCC <b>FGFR ORAL PILL (MONOTHERAPY)</b>	<ol style="list-style-type: none"> <li>Child Pugh A</li> <li>Failed/Intolerant to Sorafenib</li> <li>No clinically significant ascites</li> <li><b>Be tumor- FGF19-positive as determined by a Sponsor-designated laboratory prior to enrollment</b></li> <li>Requires Biopsy</li> </ol>
Sanofi ACT15377	Unresectable HCC (excluding fibrolamellar and mixed hepatocellular/cholangiocarcinoma). Radiology diagnosed HCC. Child Pugh Class A.	Slots Strictly Allocated - Must Request Prior	A Phase 1/2 open-label, multi-center, safety, preliminary efficacy and pharmacokinetic (PK) study of isatuximab (SAR650984) in combination with atezolizumab or isatuximab alone in patients with advanced malignancies	<ol style="list-style-type: none"> <li>Stage C disease, or BCLC Stage B disease not amenable to locoregional therapy or refractory to locoregional therapy, and not amenable to a curative treatment approach</li> <li>PD during or after treatment with either sorafenib or lenvatinib, or intolerance to the therapy</li> </ol>
<b>Cholangio Studies</b>				
Incyte 54828 (FGFR)	Cholangiocarcinoma	Slots Strictly Allocated - Must Request Prior	A Phase 1/2, Open-Label, Dose-Escalation, Safety and Tolerability Study of INCB054828 in Subjects With Advanced Malignancies <b>FGFR ORAL PILL (MONOTHERAPY)</b>	<ol style="list-style-type: none"> <li>Must have FGFR translocation by Foundation Medicine, Caris, etc.</li> <li>Must be amendable to biopsy</li> </ol>
Eisai H3B-6527-G000-101	Advanced, unresectable, or recurrent HCC/ICC TUMORS MUST EXPRESS FGF19 [FOUNDATION, ETC.]	Open and Enrolling	An Open-Label Multicenter Phase 1 Study to Evaluate the Safety, Pharmacokinetics and Pharmacodynamics of H3B-6527 in Subjects With Advanced HCC <b>FGFR ORAL PILL (MONOTHERAPY)</b>	<ol style="list-style-type: none"> <li>Child Pugh A</li> <li>Failed/Intolerant to Sorafenib</li> <li>No clinically significant ascites</li> <li><b>Be tumor- FGF19-positive as determined by a Sponsor-designated laboratory prior to enrollment</b></li> <li>Requires Biopsy</li> </ol>

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<b>Esophageal/Gastroesophageal Studies</b>				
<b>Adjuvant</b>				
BMS CA209-577	Stage II or Stage III adeno or squamous carcinoma of the esophagus or gastroesophageal junction	Open and Enrolling	A Randomized, Multicenter, Double Blind, Phase III Study of Nivolumab or Placebo in Subjects with Resected Lower Esophageal, or Gastroesophageal Junction Cancer	<ol style="list-style-type: none"> <li>1. Must complete pre-operative chemoradiotherapy and surgery prior to enrollment</li> <li>2. Subject must have complete resection (R0), have been surgically rendered free of disease with negative margins on resected specimens defined as no vital tumor present within 1 mm of the proximal, distal, or circumferential resection margins. Subject must have residual pathologic disease, non-pathologic complete response (nonpCR) of their EC or GEJ, with at least ypN1 or ypT1 listed in the pathology report of resected specimens.</li> </ol>
<b>1L - Metastatic</b>				
BMS CA224-060	Histologically- or cytologically-confirmed diagnosis of unresectable, locally advanced, or metastatic GC or GEJ adenocarcinoma	Open and Enrolling	<p><b>RANDOMIZED</b></p> <p>Study of Relatlimab in Combination with Nivolumab with Chemotherapy Versus Nivolumab with Chemotherapy in Patients with Gastric or GEJ</p> <p><b>FOLFOX+OPDIVO</b></p> <p><b>FOLFOX+OPDIVO+LAG3</b></p>	<ol style="list-style-type: none"> <li>1. Participant must be previously untreated with systemic treatment given as primary therapy for unresectable, locally advanced, or metastatic gastric or GEJ adenocarcinoma</li> </ol>
<b>Metastatic</b>				
<b>Metastatic - Squamous Cell</b>				
Genentech - Roche BP40234	Recurrent or metastatic esophageal cancer (Squamous)	Open and Enrolling	PHASE II STUDY TO EVALUATE THE THERAPEUTIC ACTIVITY OF RO6874281, AN IMMUNOCYTOKINE, CONSISTING OF INTERLEUKIN-2 VARIANT (IL-2V) TARGETING FIBROBLAST ACTIVATION PROTEIN-A (FAP), IN COMBINATION WITH ATEZOLIZUMAB, IN PARTICIPANTS WITH ADVANCED AND/OR METASTATIC SOLID TUMORS	<ol style="list-style-type: none"> <li>1. Experienced progression or intolerance while receiving &gt; 1 line of standard therapy</li> <li>2. Must be amendable to biopsy</li> </ol>

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Study Number	Disease Status	Slot Availability	Study Title	Basic Eligibility
<b>Colon Studies</b>				
<b>2nd Line</b>				
BMS CV202-103 (CRX2)	Metastatic CRC previously treated with one line of oxaliplatin-based systemic therapy in the metastatic setting or progression on or within 6 months of adjuvant oxaliplatin based chemotherapy.	Open and Enrolling	RANDOMIZED A Phase Ib/II Study of BMS-813160 in Combination with Chemotherapy or Nivolumab in patients with Advanced Solid Tumors <b>FOLFIRI + CRX2 (ORAL MEDICATION)</b> <b>FOLFIRI ALONE</b>	1. Must be amendable to biopsy X2
<b>2nd or 3rd Line</b>				
BMS CA021-002 (ICOS)	Participant must have non-resectable metastatic disease	Slot Request Required	A Phase 1/2 Dose Escalation and Combination Cohort Study to Evaluate the Safety and Tolerability, Pharmacokinetics, and Efficacy of BMS-986226 (anti-ICOS mAb) Alone or in Combination with Nivolumab or Ipilimumab in Patients with Advanced Solid Tumors	1. Biopsiable disease - Willing to undergo 2 mandatory tumor biopsies 2. Participants must have received at least 1, but no more than 3, prior systemic therapies for metastatic and/or unresectable disease
<b>Greater than 1st Line - KRAS Wild Type</b>				
Checkpoint REFMAL 449	KRAS wild-type adenocarcinoma of the colon or rectum that is metastatic and/or unresectable	Slots Strictly Allocated - Must Request Prior	A Phase 1/2 Open label, safety, pharmacokinetic and efficacy study of ascending doses of Oral CK-101 in Patients with Advanced Cancer known as SCRI study REFMAL 449	1. Any refractory solid tumor setting where targeting EGFR may be reasonable 2. Ability to swallow pills
<b>Pancreatic Studies</b>				
<b>1st Line - Unresectable, locally advanced</b>				
Silenseed SLSG12D-P2	Unresectable, locally advanced pancreatic cancer - stage III defined as T4, N (any) and M0	Open and Enrolling	RANDOMIZED Phase 2 - Loder Treatment [VIA EUS] in Combination with Gem+Abraxane vs. Gem+Abraxane Alone WORKING WITH DR. LIGRESTI'S GROUP TO PERFORM PROCEDURES	1. Have a target tumor that is accessible for intratumoral administration by EUS as determined by the radiologist/gastroenterologist performing the EUS intratumoral administration. EXCLUSION: Subjects with resectable and borderline resectable pancreatic cancer
<b>1st Line</b>				
BMS CV202-103 (CRX2)	Metastatic pancreatic previously untreated or recurring systemically after surgery or > 6 months post neoadjuvant/adjuvant therapy.	Open and Enrolling	RANDOMIZED A Phase Ib/II Study of BMS-813160 in Combination with Chemotherapy or Nivolumab in patients with Advanced Solid Tumors <b>GEM/ABRAXANE + CRX (ORAL DRUG)</b> <b>GEM/ABRAXANE + CRX (ORAL DRUG) + OPDIVO</b> <b>GEM/ABRAXANE ALONE</b>	1. Must be amendable to biopsy X2
<b>Greater than 1st Line</b>				
Checkpoint REFMAL 449	Locally advanced, unresectable or metastatic pancreatic cancer	Slots Strictly Allocated	A Phase 1/2 Open label, safety, pharmacokinetic and efficacy study of ascending doses of Oral CK-101 in Patients with Advanced Cancer known as SCRI study REFMAL 449	1. Any refractory solid tumor setting where targeting EGFR may be reasonable 2. Ability to swallow pills