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NCI National Clinical Trials Network

EA2174

ECOG-ACRIN cancer research group

For Patients with Locoregional Esophageal and Gastroesophageal Junction Adenocarcinoma

EA2174 Available Through ECOG-ACRIN Cancer Research Group

A Phase II/III Study of Peri-operative Nivolumab and Ipilimumab in Patients with Locoregional Esophageal and Gastroesophageal Junction Adenocarcinoma

Patient Population

See Section 3 for Complete Eligibility Details

Eligibility- Step 1 Randomization:

- Age ≥ 18 years, ECOG PS 0-1 and adequate lab values
- Must have histologically confirmed T1N1-3M0 or T2-3N0-2M0 esophageal or gastroesophageal junctional adenocarcinoma (Siewert I and II)
- Must be deemed a surgical candidate by a thoracic surgeon, surgical oncologist, or surgeon qualified to perform an esophagectomy
- No prior chemotherapy/radiation therapy for management of this malignancy; no prior immunotherapy for management of this malignancy/any other past malignancy
- No contraindication to receiving carboplatin/paclitaxel chemotherapy/radiation therapy (RT)
- No active autoimmune disease/history of autoimmune disease that might recur, which may affect vital organ function/require immune suppressive treatment (see protocol)
- No previous or concurrent malignancy (exceptions per protocol)
- No condition requiring systemic treatment with corticosteroids/other immunosuppressive medications within 14 days of study drug administration (see protocol)
- Must have adequate cardiac function per protocol
- Must not test positive for HepB/C per protocol; HIV/AIDS patients must have no detectable viral load on a stable anti-viral regimen
- No patients with uncontrolled intercurrent illness (see protocol)

Eligibility- Step 2 Randomization:

- Registration must not exceed 12 weeks from time of esophagectomy
- Postoperative ECOG PS 0-2 and adequate lab values
- Must be disease free following esophagectomy, demonstrated by having no evidence of disease on a post-surgical CT scan; must also have negative surgical margin

Treatment Plan

See Section 5 for Complete Treatment Details

Treatment must start within 10 working day after registration (note: after step 1 randomization)

Step 1: day 1 must begin on the first day of RT +/- 2 days

- **Arm A:** Weeks 1-5: Carboplatin AUC of 2 once weekly AND, Paclitaxel 50 mg/m² IV once weekly
- **Arm B:** Weeks 1-5: Carboplatin AUC of 2 IV once weekly AND, Paclitaxel 50 mg/m² IV once weekly AND, Nivolumab 240 mg IV over 30 mins days 1 and 15
- **Radiation Therapy** (must begin within 10 working days after Step 1 randomization):
  - ◊ Photon (3D-CRT/IMRT) or proton therapy (passive-scattering/scanning beam; requires credentialing) are allowed
  - ◊ Total prescription dose: 50.4 Gy in 28 fractions (1.8 Gy per fraction); 41.4 Gy to 50.4 Gy is permitted per treating radiation oncologist discretion
- Surgical resection to occur 4-8 weeks after treatment completion, although surgery may be performed up to 12 weeks post therapy completion; surgical approach is at the treating surgeons discretion (see protocol)

Step 2: 1 cycle = 4 weeks

- **Arm C:** 12 month course of therapy; nivolumab 480 mg IV over 30 mins day 1, cycles 1-13
- **Arm D:** Nivolumab 480 mg IV over 30 mins day 1, cycles 1-13, AND, ipilimumab 1 mg/kg IV once every 6 weeks over 90 mins, cycle 1 day 1, cycle 2 day 15, cycle 4 day 1 and cycle 5 day 15

Notes:

- *Doses based on actual body weight, except nivolumab (flat dose); Calvert formula for carboplatin dosing*
- *Monitor patients per protocol prior to drug administration*
- *If a week of carboplatin and paclitaxel is missed, it may be made up during week 6 as long as there is RT still to be administered (max = 5 doses); a missed dose of nivolumab must not be replaced*

Study Chair:
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Patient Enrollment

All Sites: Oncology Patient Enrollment Network (OPEN), https://open.ctsu.org/open

Protocol Information

ECOG-ACRIN Operations-Boston: 857-504-2900, http://ecog-acrin.org (Member Login)

Please Enroll Your Eligible Patients!

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