

# EA3161

## For Patients with Oropharyngeal Squamous Cell Carcinoma

### EA3161 Available Through ECOG-ACRIN Cancer Research Group

A Phase III Randomized Study of Maintenance Nivolumab versus Observation in Patients with Locally Advanced, Intermediate Risk HPV Positive OPSCC

#### Patient Population

See Section 3 or Complete Eligibility Details

##### Eligibility Criteria for Step 1 Randomization:

- Age  $\geq$  18 years, ECOG PS 0-1, adequate lab values
- Must have oropharynx cancer (AJCC 8) that is p16-positive by immunohistochemistry **or** p16 equivocal by IHC and HPV positive by in situ hybridization, with:  $\geq$  10 pack-years, stage T1-2N2-N3 or T3-4N0-3 **or**  $<$  10 pack-years, stage T4N0-N3 or T1-3N2-3
- Must not have known hypersensitivity to nivolumab/compounds of similar chemical/biological composition; no history of allergic reactions attributed to platinum-based chemotherapy agents
- Must not have had prior systemic therapy, radiation treatment or surgery for p16 positive OPSCC (see protocol for details)
- Must not have received previous radiation for head and neck tumor, skull base, or brain tumors
- Patients with evidence of distant metastases/leptomeningeal disease are excluded
- No patients with uncontrolled inter-current illness that would interfere with the ability to undergo therapy
- Patients with a history of prior/2nd malignancy are excluded (see protocol for exceptions)
- Must have measurable disease per protocol
- Must have tumor measurements with CT of neck and CT of chest (or CT of neck and FDG PET/CT if standard of care) within 4 wks prior to step 1 randomization
- Must not have autoimmune disease(s) per protocol
- Must not have baseline clinically significant hearing loss

##### Eligibility Criteria for Step 2 Registration:

- Must have progression (RECIST) and tissue-proven progression on Arm B treatment within 12 mos after completion of radiation therapy
- Must not have received non-protocol anti-cancer therapy after completion of radiation and chemotherapy
- ECOG PS 0-1 and adequate lab values
- Tumor measurements with CT of neck and CT of chest (or CT of neck and FDG PET/CT if standard of care) within 4 wks prior to step 2 registration

#### Treatment Plan

See Section 5 for Complete Treatment Details

##### Arm A:

- Cisplatin 40 mg/m<sup>2</sup> weekly (+/- 2 days) during a 5 days/wk radiation schedule with 70 Gy of radiation administered once daily; 7 weeks
- Maintenance therapy with nivolumab will initiate within 4-8 weeks after completion of concurrent therapy of cisplatin/RT
  - ◊ Nivolumab administered at 480 mg IV q4 wks for 12 cycles (thus completing 1 yr maintenance therapy provided there is no evidence of disease progression/other reason for discontinuation, i.e., toxicity)

##### Arm B:

- Cisplatin 40 mg/m<sup>2</sup> weekly during a 5 days/wk radiation schedule with 70 Gy of radiation administered once daily; 7 weeks
- Following the completion of the 7 weeks of concurrent therapy of cisplatin/RT, the patient will go on to observation

##### Arm C:

- Patients who were randomized to observation will be offered the option to cross over if they have clearly documented progression per protocol
- After progression and registration to Step 2, nivolumab will be administered at 480 mg IV q4 wks for 12 cycles starting within 2 wks of Step 2 registration
- Patients will complete a total of 1 yr of therapy provided there is no evidence of disease progression/other reason for discontinuation

##### Notes:

- See protocol for hydration and antiemetic details
- See protocol for salvage surgery details (Arms A and B)
- See protocol for RT credentialing requirements
  - ◊ IMRT and IGRT are required; proton therapy is not permitted; at least 4 MV shall be used; cyberknife treatment is not allowed
- CT simulation is required for all patients

#### Patient Enrollment

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

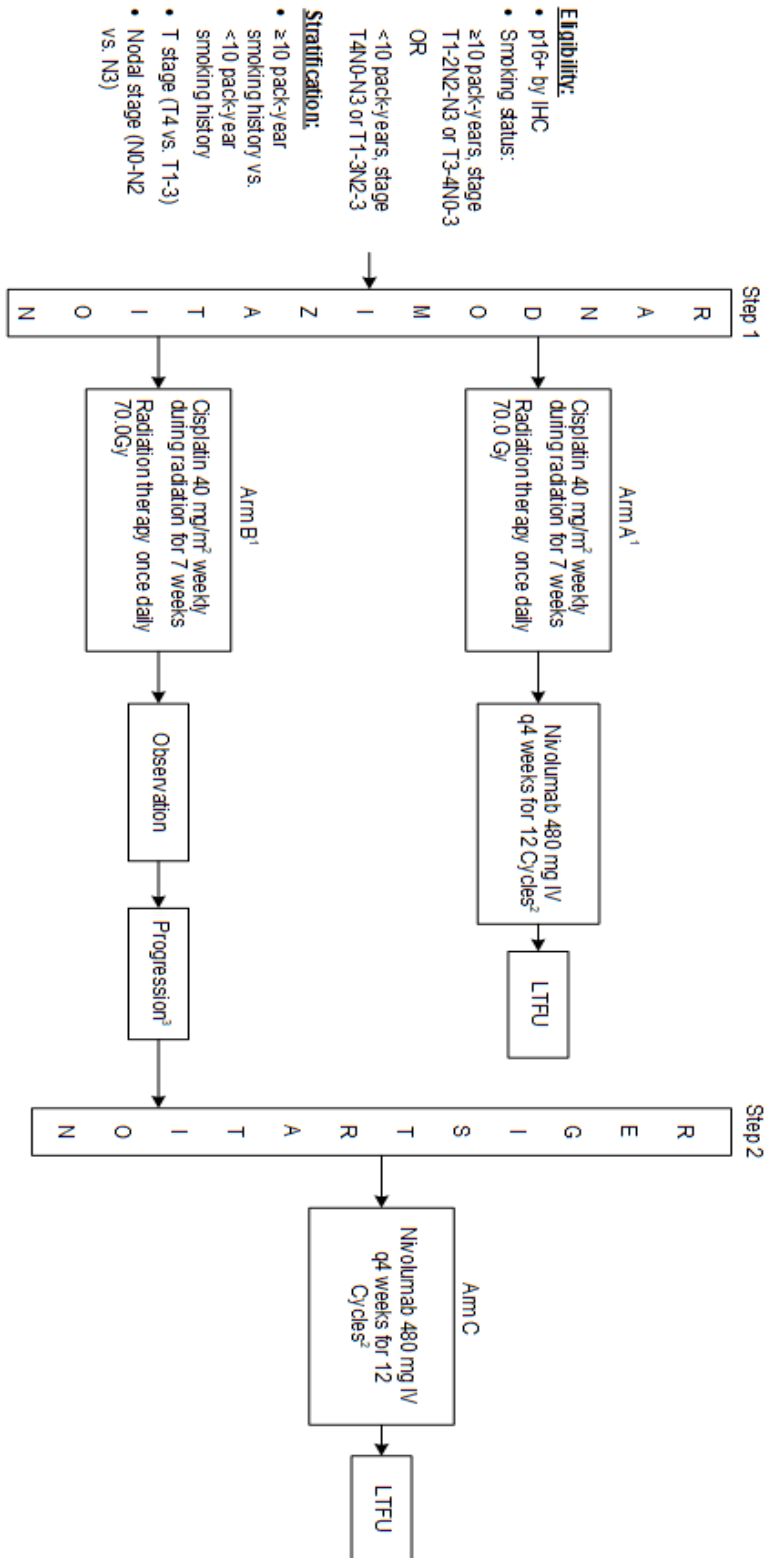
#### Protocol Information

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

**Please Enroll Your Eligible Patients!**

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## Schema



Accrual Goal: 636

1. Submit tissue for PD-L1 testing.
2. Cycle length = 28 days
3. Patients who were randomized to observation will be offered the option to cross over if they have clearly documented progression by the RECIST criteria and tissue-proven progression within 12 months from the end of cisplatin/radiation therapy.