Scrip
Informa Pharma Intelligence

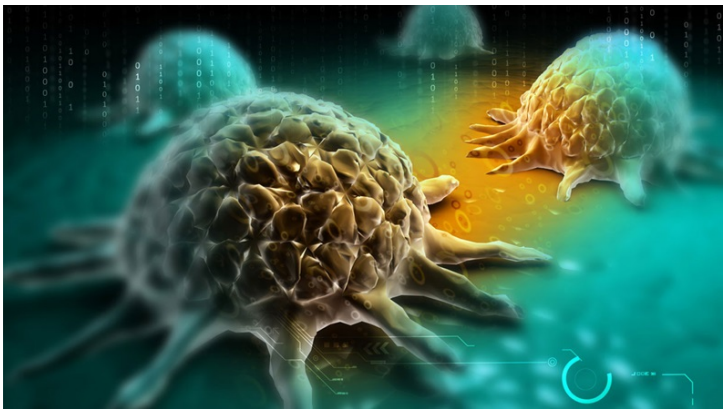
Deciphera's Ripretinib Cuts GIST Death Risk By 64%; US Filing On Track For Early 2020

01 Oct 2019 | **NEWS**

by Leah Samuel | leah.samuel@informa.com

Executive Summary

Overall survival for patients with gastrointestinal stromal tumors (GIST) in the fourth-line setting was 15.1 months versus 6.6 months for placebo, building on impressive progression-free survival results.



DECIPHERA ENCOURAGED BY OVERALL SURVIVAL DATA

An encouraging improvement in overall survival in the Phase III INVICTUS clinical trial for Deciphera Pharmaceuticals Inc.'s ripretinib build on previously reported progression-free survival data and keep the company on track to seek US Food and Drug Administration approval in early 2020 for its kinase inhibitor in the fourth-line treatment of gastrointestinal stromal tumors (GIST).

Data presented at the European Society for Medical Oncology (ESMO) Congress on 30 September in Barcelona showed median overall survival of 15.1 months for heavily pre-treated GIST patients in the ripretinib arm of INVICTUS and 6.6 months for those who received placebo, which translated to a 64% reduction in the risk of death (HR=0.36, nominal p=0.0004). Jefferies analyst Eun Yang said in a same-day note that the data confirm the limited regulatory risk for ripretinib in the fourth-line setting and increase the likelihood that an ongoing Phase III study in second-line GIST will be successful.

Deciphera reported top-line results from INVICTUS in August, including a statistically significant difference between ripretinib and placebo on the primary endpoint of progression-free survival (PFS) – 6.3 months versus one month (HR=0.15; p<0.0001), or an 85% reduction in the risk of disease progression for GIST patients on their fourth round of treatment. (Also see "Deciphera Plans Ripretinib NDA Filing For Q1 2020 On Phase III GIST Data" - Scrip, 13 Aug, 2019.)

The registrational study enrolled 129 patients previously treated with at least three prior therapies – Novartis AG's Gleevec (imatinib), Pfizer Inc..'s Sutent (sunitinib) and Bayer AG's Stivarga (regorafenib) – who were randomized 2:1 for treatment with 150 mg of ripretinib or placebo once-daily.

Deciphera reported that eight patients treated with ripretinib (9.4%) had a confirmed objective response versus no responses in the placebo arm of INVICTUS, which was not statistically significant. And while there was a wide difference in median OS for patients enrolled in the two study arms, this was not deemed to be statistically significant, because the assessment of significance for OS depended on a significant finding on response rates, the company explained.

Yang noted that among patients who crossed over from placebo to ripretinib the median OS was 11.6 months, which was well above the result for the placebo patients and closer to that of patients who received only ripretinib – a significant indicator of the drug's activity in GIST.

Margaret von Mehren of Fox Chase Cancer Center in Philadelphia said in a statement from Deciphera that based on the statistically significant PFS results and "clinically meaningful" OS improvement over placebo ripretinib could be a standard-of-care therapy for GIST patients with tumor mutations known to drive cancer growth who have no remaining treatment options.

Ripretinib is a tyrosine kinase switch control inhibitor that inhibit KIT and PDGFRa, and is being developed to treat tumors driven by mutations in these kinases, including GIST and systemic mastocytosis. The US FDA granted fast track designation for ripretinib in fourth-line GIST in June.

Deciphera has the option of a rolling new drug application (NDA) submission for the drug in this heavily pre-treated GIST setting. The company has not yet disclosed whether it would go that route, but remains in discussions with regulators.